



## WALKING CREW EVALUATION

*Your opinion and comments are valuable and appreciated. Please take a moment to complete this evaluation. The information will be used to improve and plan future programs. Please rate your experience from 1 – 5 (1=Poor 2=Fair 3=Satisfactory 4=Good 5=Excellent)*

Are you:      new       returning       Today's Date: \_\_\_\_\_

Facility: \_\_\_\_\_

1. How did you learn about this activity?

- ETC Brochure     Friend Family     Visit to Park  
 Profile             Newspaper        School Flyer  
 Other: \_\_\_\_\_

2. Did the program meet your and/or your child's expectations? 1 2 3 4 5  
If not, what could we do better?

\_\_\_\_\_  
\_\_\_\_\_

3. Was the program described accurately in the brochure or flyer? If not, please explain.      1 2 3 4 5

\_\_\_\_\_  
\_\_\_\_\_

4. How would you rate the Walking Crew staff?      1 2 3 4 5

5. How does the cost of this activity compare with others you have been involved in?      1 2 3 4 5

6. Were the front counter staff courteous and helpful?      1 2 3 4 5

7. Was the facility clean, attractive and comfortable?      1 2 3 4 5

8. Would you recommend this program to a friend or family member?      1 2 3 4 5

9. Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_

10. Would you like to receive advance notice regarding our day camp programs?

Yes  No

If yes, please provide email address. \_\_\_\_\_

*Thank you for your comments.*