

## **ACTIVITY EVALUATION**

Your feedback helps us improve our activities and events. Please answer the following questions and return to the activity instructor, or click below to email.

Activity Name:					Date:			
Season: Winter/Spring	Summer		Fall		20			
nstructor Name								
	1 = poor		5 = exce	5 = excellent				
nstructor	1	2	3	4	5			
Number of activity sessions	1	2	3	4	5			
ength of each session	1	2	3	4	5			
Was brochure description of the activity accurate?						YES	NO	
Will you participate in Park District activities in the future?						YES	NO	
Would you recommend this event?(If no, please explain below)						YES	NO	
Comments:								
Would like to be contacted about this activity? If yes, provide contact information. (OPTIONAL)						YES	NO	
Name:								
Phone: Email:								
rman: Thank you for completing this eva	luntin	n/ P-	. pranidin	a cont	nat infor	mation	u will be entered	into ou

**EMAIL TO TINLEY PARK-PARK DISTRICT** 

seasonal prize drawing from all returned evaluations.

