

## Program Feedback

The Township of Springwater is seeking your input regarding our recreation programs. Please help us measure and enhance our program by completing this survey.

Please note that this survey is anonymous. Personal information will not be collected unless you request a response.

**Program Name:**

**Location:**

**Instructor:**

**How did you hear about this program?**

- Program Guide
- Community Newsletter
- School Flyer
- Friend
- Website
- Twitter
- Facebook
- Road Sign
- Other

**Please rate your experience using the chart below:**

Item	Poor	Below Average	Average	Good	Excellent	Not Applicable
Please rate the Registration Process:						
Did your child / you enjoy the program:						

Item	Poor	Below Average	Average	Good	Excellent	Not Applicable
Organization of the program:						
Program Instructor (knowledge, motivation, etc.):						
Overall Satisfaction with the program"						

**Comments:**

**Will you recommend Township of Springwater recreational programs to others?**

- Yes  
 No  
 Maybe