

# Walker Family Reunion Evaluation Form

Entering your name is optional

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Country \_\_\_\_\_ New address? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Website \_\_\_\_\_

## General feelings about this year's reunion

Did you enjoy the reunion this year? \_\_\_Yes \_\_\_No \_\_\_Mixed feelings  
Would you attend another reunion next year? \_\_\_Yes \_\_\_No \_\_\_Depends

## What did you like or dislike about this year's reunion?

Did you like where the reunion was held? \_\_\_Yes \_\_\_No  
Why or why not? \_\_\_\_\_  
How was the reunion length? \_\_\_Too long \_\_\_Too short \_\_\_Just right  
How was the number of activities? \_\_\_Too many \_\_\_Too few \_\_\_Just the right amount  
What was your favorite activity? \_\_\_\_\_  
What was your **least** favorite activity? \_\_\_\_\_  
Did you like the food? \_\_\_Yes \_\_\_No \_\_\_Some of it \_\_\_Most of it  
Which food would you **not** have again? \_\_\_\_\_  
What one thing should we definitely do again next year? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you could change one thing about the reunion, what would it be? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Do you have any suggestions for future reunions?

How long should the reunion be? \_\_\_ one day \_\_\_ two days  
Location ideas \_\_\_\_\_  
Best time of year \_\_\_\_\_  
Food ideas \_\_\_\_\_  
Activity Ideas \_\_\_\_\_  
Any additional ideas/comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_