

Caring for the Kingdom

A Kansas City Community Touchdown



Your Post-Game Evaluation

1. How satisfied were you with the event? (circle options)

- | | | | |
|----------------------------|------------------|-------------|-----------------|
| Date: | 1 Very Satisfied | 2 Satisfied | 3 Not Satisfied |
| Location of event: | 1 Very Satisfied | 2 Satisfied | 3 Not Satisfied |
| Speaker selections: | 1 Very Satisfied | 2 Satisfied | 3 Not Satisfied |
| Tailgate Exhibitor layout: | 1 Very Satisfied | 2 Satisfied | 3 Not Satisfied |
| Catering – Meal Package: | 1 Very Satisfied | 2 Satisfied | 3 Not Satisfied |
- Did you benefit from the Locker Room Huddle Game Plan discussion? Yes ___ No ___
- Would you like discussions like this in the future? Yes ___ No ___

2. Do you plan to attend this conference in the future, and why? Yes ___ No ___

Why or why not? _____

3. How can we improve for next year? _____

4. How likely are you to recommend this conference to a friend or colleague?

- 1 Very Likely 2 Likely 3 Not Likely

5. How satisfied are you with the quality of the networking opportunities?

- 1 Very Satisfied 2 Satisfied 3 Not Satisfied

6. What did 2 things did you like most about the event offerings and Chiefs' theme?

1. _____
2. _____

7. Which topics would you like to see covered at future conferences or monthly presentations?

8. What were your favorite experiences or moments? _____

9. Did you find the new PDF PHONE viewing of our booklet helpful? Yes ___ No ___
What else would have been helpful to add to this? _____
Comments: _____

10. If networking was a priority, was there enough time to build new contacts? Yes ___ No ___
What would you suggest if you answered No? _____

11. Who was your favorite presentation and why? _____

12. Do you have any suggestions or feedback you would like to share? _____

13. Are there any local speakers you would like to see present at our next symposium? Yes ___ No ___
Who are they? _____

14. Would you prefer spring-fall half-day conferences or keep the one full-day event next year?
2 Half-day Events Yes ___ No ___ Why? _____
Full-day Event Yes ___ No ___ Why? _____

Your Name _____

Your Company _____

Please leave at Registration Booth at end of day.

Thanks for your support and feedback! It helps us start preparing for next year.
Co-Sponsors GKC MGMA, KCMMA, and AAPC of KC