#### Your Opinion Matters!

Your ideas will help us design and deliver programs that are most important to you and your family. Your opinions can influence program changes and budget decisions for the upcoming year. Thank you for taking a moment to fill out this short survey!

How was your overall experience with the family programming this year? Please check all that apply below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Program, Event, or Activity  (*Insert your organization’s activities*) | Loved It! | It was Okay... | Neutral -- No Opinion | Needs Improvement |
| Family Meet and Greet |  |  |  |  |
| Family Movement Night |  |  |  |  |
| Advocacy Day |  |  |  |  |
| Healthy Lifestyles Workshop |  |  |  |  |
| Cultural / Diversity Festival |  |  |  |  |
| (If we missed a family invite that was important to you, please include) |  |  |  |  |
|  |  |  |  |  |

1. How did you enjoy engaging with other families and what were one or two memorable moments?
2. What was your favorite activity and why?
3. Do you feel any of the offerings should not be offered next year? Why?
4. Were the events offered on days and times that were convenient for you and your family to attend? If not, how can we improve scheduling next year?

Is there any other event you think we should offer next year?