



BAINBRIDGE ISLAND METROPOLITAN PARK & RECREATION DISTRICT

7666 NE High School Road  
Bainbridge Island, WA 98110

ACTIVITY EVALUATION

Activity Name \_\_\_\_\_ Activity Instructor \_\_\_\_\_

Activity Date \_\_\_\_\_ Activity Time \_\_\_\_\_

1. Is this the first class or activity you have taken with the Park District? Yes No
2. Please rate this activity:  
Excellent Very Good Good Adequate Poor No Opinion
3. Was the fee reasonable? Yes No
4. Was the length of each class: Too Short Just Right Too Long
5. Were the number of classes: Too Few Just Right Too Many
6. Were the number of activity participants: Too Few Just Right Too Many
7. Did the activity meet your expectations? Yes No
8. Do you feel the instructor has a good knowledge of the subject? Yes No

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9. Was there anything outstanding about the instructor's performance? Yes No

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10. What was the best thing about this activity?

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11. How could this activity be improved?

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12. Would you take additional classes or activities with this instructor? Yes No

13. What other activities would you like to have the Park District offer?

**THANK YOU!**