

Okte Elementary PTA Event Feedback Survey

Thank you for taking the time to fill out this survey for the PTA. This feedback will be used to plan for future events, as well as to improve services offered by the PTA.

Name of the Event: _____

What did you like most about the event?

What did you like the least?

Was the duration of the event too long too short just right

Was the cost of the event too expensive too inexpensive just right?

Would you attend this event again? Yes No

Were you a volunteer at this event? Yes No

Did you enjoy the event? Yes No
Would you volunteer again? Yes No

If you were not a volunteer, would you like to be a volunteer in the future? (If yes, please include name and phone number.)

Yes Name: _____ Phone: _____
 No

Please give any helpful feedback that would make this event better in coming years.

OPTIONAL

Name: _____ Phone Number: _____