

REUNION EVALUATION FORM

| ELEMENTS | COMMENTS AND/OR IMPROVEMENTS |
|--|------------------------------|
| Were the number of participants reached? | |
| Were overall goals achieved? | |
| Did we stay within Budget? | |
| Did committee members complete assignments? | |
| Did committee members stay within budget? | |
| Did committee heads communicate regularly with members? | |
| How was the special remembrances for those who died this year? | |
| Were there sufficient number of helpers? | |
| Did committee meet regularly or have sufficient number of meetings? | |
| Was the site location well suited for the event? | |
| Were there favorable comments received about location? | |
| Was parking adequate? | |
| Were amenities adequate? | |
| Was hospitality adequate (tables, chairs, food, space, on-site personnel, etc.)? | |
| Was lunch program well received? | |
| Was equipment adequate? | |
| Was the presentation of the food/service adequate? | |
| Were there sufficient food, snacks, beverages, refreshments for all? | |
| Were there sufficient number of mailings with/minimum return? | |
| Was registration smooth and organized? | |