



SUMMER FEED BACK/ SURVEY FORM

This form may be returned to the Breakers mail slot in the Gift Shop at the Pool.

- 1) How long have you been with the Breakers Summer Swim Club? (please circle)
• New
• Returning from Winter Maintenance
• Long term Summer Swimmer
2) What did you think of the Breakers program? On a scale of 1 to 10 (10 being BEST) please rate the following; (please circle)

Table with 11 columns (1-10) and 18 rows listing various club activities and programs for rating.

Additional comments on the above:

- 3) Is there any suggestions you have that would benefit the club and make it a better experience?
4) Would you recommend the Breakers to family and friends? If no, please explain.
5) Will you be returning for another season with the Breakers? If no, please explain.
6) Any other comments?

Optional information, if you would like to be contacted by a member of the Board please complete the following;

Your name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

The CV Breakers Board of Directors would like to thank-you for your time in filling out this survey, your valuable feedback helps us improve the program.