



2011 Evaluation Form  
 Please let us know what you liked  
 (so we don't change it),  
 and what you didn't like  
 (so we do change it).

Put your completed evaluation form in the box in the Dining Hall, or mail it to us at FootFall, 4520 Fidelity Court, Annandale, Virginia 22003-4525 or fill it out online (<http://footfalldance.com>)

1. What did you like most about FootFall? \_\_\_\_\_  
 What did you like least about FootFall? \_\_\_\_\_

2. What was the most important factor in your decision to attend FootFall? (e.g. cost, bands, callers, travel time, etc.) \_\_\_\_\_

3. Did you attend last year? Yes  No   
 If "Yes," was there anything you liked better this year? \_\_\_\_\_  
 Was there anything you liked less this year? \_\_\_\_\_

4. Bands and callers. *Please rate from 1 (poor or unsatisfactory) to 5 (excellent):*

Nor'easter	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Diane Silver	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Perpetual e-Motion	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Seth Tepfer	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Green Light Karma	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Comments:	_____				
Comments: _____											

5. Suggestions for bands and callers for future years? \_\_\_\_\_  
 \_\_\_\_\_

6. Workshops (*Rate those you attended on the same 1-to-5 scale*):

Waltz (Gaye & Wayne)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Additional Comments? _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
English Country (Melissa)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Snoa/Schottische (Ted & Lynn)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Clogging (Kim & Jan)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Hambo (Ted & Lynn)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Foot Percussion (Jan)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Dutch Crossing (Gaye)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Zydeco Dance (Su)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
<i>Non-Dance Workshops</i>						
Footsore (Susan)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Fossil Dig (John)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Open Sing (Steve)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Juggling (Bill)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Stretching (Jillian)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Sewing (April)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	
Shape-Note Singing	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	

7. Workshop suggestions for 2012: \_\_\_\_\_

8. Any comments regarding Policies & Procedures (e.g. registration, cabin assignment)?  
 \_\_\_\_\_  
 \_\_\_\_\_

9. Dance venues:  
 a. Comfortable? Too crowded? \_\_\_\_\_  
 b. Clean? \_\_\_\_\_  
 c. Other comments? \_\_\_\_\_
10. Floor conditions: Gym: \_\_\_\_\_ Playhouse \_\_\_\_\_ Canteen \_\_\_\_\_  
 a. Would you be willing to contribute to a fund to purchase a floor surface (for dance use only) for the Playhouse, to improve its "danceability?" \_\_\_\_\_
11. Any comments regarding Camp venues (Dining Hall, pool/pool hours, Playhouse/canteen)?  
 \_\_\_\_\_
12. Any comments regarding your cabin? \_\_\_\_\_  
 Your cabin number/name(optional) \_\_\_\_\_
13. Were maintenance issues addressed promptly? Yes  No   
 Comments: \_\_\_\_\_
14. Did you have trouble finding any building at the camp? Yes  No   
 What building? \_\_\_\_\_  
 What would have helped? \_\_\_\_\_
15. Food (*Please rate on the same 1-to-5 scale*):
- |                      |                            |                            |                            |                            |                            |  |
|----------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|--|
| Friday dinner        | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | Additional Comments?<br>_____<br>_____<br>_____<br>_____ |
| Friday snack         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Saturday breakfast   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Saturday lunch       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Saturday dinner      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Saturday night snack | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Sunday breakfast     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
| Sunday lunch         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |  |
16. How did you hear about FootFall?  
 Email  Flyer at Glen Echo  Flyer at another dance weekend  Another dancer   
 Announcement at a dance  Came last year  Other  \_\_\_\_\_
17. This year we added "hall trees" in the group cabin bathrooms, so that campers have a convenient place to hang bathrobes, towels, etc. while they are showering. Were they helpful and convenient? \_\_\_\_\_
18. Other comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name (Optional): \_\_\_\_\_

We might post evaluation comments on our website.

May we use your comments? Yes No May we give your first name? Yes No