

LLL of ME/NH 2016 Conference Evaluation

Please complete this form, detach it and drop it off at the Registration Table.

Alternatively, you may mail it to: Kathy Drury, 7 Poliquin Dr, Nashua, NH 03062

Please evaluate the following aspects of this year's conference:

Information	Excellent	Good	Fair	Poor
Registration Brochure				
Registration Form				
Registration Process				
Program Booklet				
Signs				
	Excellent	Good	Fair	Poor
Quality of Speakers				
Session Choices				
Day's Schedule				
Features	Excellent	Good	Fair	Poor
Parking				
Bathrooms				
Rock and Rest				
Children's Activity Center				
Silent Auction				
Serendipity Auction				
Exhibits/Vendors				
Layout of Site (school)				
Meals	Excellent	Good	Fair	Poor
Lunch Menu				
Lunch Cost				
Snack Table				

Session 1

Session Title:

Presenter(s):

	Excellent	Good	Fair	Poor
How well did the title and description fit the content?				
How well did the presentation meet your expectations?				
Did the speaker(s) use sufficient research?				
Were the handouts and visual aids useful?				
What is your overall feeling on this session?				
What did you like best about this session?				
How could this session have been improved?				
Additional comments:				

Session 2

Session Title:

Presenter(s):

	Excellent	Good	Fair	Poor
How well did the title and description fit the content?				
How well did the presentation meet your expectations?				
Did the speaker(s) use sufficient research?				
Were the handouts and visual aids useful?				
What is your overall feeling on this session?				
What did you like best about this session?				
How could this session have been improved?				
Additional comments:				

Session 3

Session Title:

Presenter(s):

	Excellent	Good	Fair	Poor
How well did the title and description fit the content?				
How well did the presentation meet your expectations?				
Did the speaker(s) use sufficient research?				
Were the handouts and visual aids useful?				
What is your overall feeling on this session?				
What did you like best about this session?				
How could this session have been improved?				
Additional comments:				

Session 4

Session Title:

Presenter(s):

	Excellent	Good	Fair	Poor
How well did the title and description fit the content?				
How well did the presentation meet your expectations?				
Did the speaker(s) use sufficient research?				
Were the handouts and visual aids useful?				
What is your overall feeling on this session?				
What did you like best about this session?				
How could this session have been improved?				
Additional comments:				

Please indicate all that apply to you:

- | | |
|---|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Guest Speaker |
| <input type="checkbox"/> Father | <input type="checkbox"/> Childbirth Instructor |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> MD |
| <input type="checkbox"/> LLL Member | <input type="checkbox"/> RN |
| <input type="checkbox"/> LLL Leader | <input type="checkbox"/> LPN |
| <input type="checkbox"/> LLL Leader Applicant | <input type="checkbox"/> IBCLC |
| <input type="checkbox"/> Retired LLL Leader | <input type="checkbox"/> Doula |
| <input type="checkbox"/> Area Council Member | <input type="checkbox"/> Other: _____ |

What did you enjoy most about this conference?

How did you hear about the conference?

When would you like future conferences to be held? (month, holiday, weekend, etc.)

What time of day would you like future area conferences to start? (earlier or later in the day)?

Was this your first LLL conference? If not how many have you attended?

I would like to help with the 2017 conference!

- I would like to assist on conference committee.
- I could help out on conference day.
- I would like to present or suggest a conference topic or speaker:

- I would like to suggest the following business(es) as an exhibitor, advertiser or donor:

Name:

Address:

Telephone:

Email:

Additional Comments:

LLL is not necessarily in agreement with, or responsible for, the statements made by speakers at this conference. The thoughts and opinions expressed by the speakers are their own. If you have a concern, please include it on this evaluation form or write to: Aimee Gerbi 29 Pond St., Orono, ME 04473