Ties That Bind
Challenge Course Evaluation

GROUP ______________________ DATE: _____________________

FACILITATORS: _______________________________________

We are constantly growing and seeking to improve the quality of our programs. Your feedback, both positive and negative is important in helping us to achieve this goal. This evaluation is optional – please be open and honest.

Please rate each question from 1-5, with 5 being the highest.

1  2  3  4  5  Were you satisfied with the Challenge Course?
1  2  3  4  5  Would you recommend this course to a friend?
1  2  3  4  5  Were the facilitators well prepared for this course?
1  2  3  4  5  Did the facilitators encourage participation in the debriefs?
1  2  3  4  5  Were the facilitators supportive of your group?
1  2  3  4  5  Did the facilitators demonstrate a high degree of safety consciousness?

Please take your time in answering these questions.

1.  What did you like about the ropes course?

2.  What did you learn about yourself as an individual? As a group member?

3.  What suggestions or changes would you make?

4.  How was this course useful to your group?