

## Spikeroos Program 2024 Survey

Did you enjoy our Spikeroos Term Program? Do you have any feedback? Let us know!
Contact email address
(Required) 1. Which Spikeroos Term Program did you attend?  Example: Spikeroos Auburn Sunday Intermediate
2. (Required) 2. Participant's age?
3. 3. Participant's gender?
4. 4. Participant's ethnicity?
5. (Required) 5. Is this the first time the participant has attended our Spikeroos Term Program?
6. (Required) 6. How did you hear about our Term Program?
7. (Required) 7. What was the participant's favourite part of the program?

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8. (Required) 8. How satisfied were you with the Spikeroos Term Program? (Please tick ONE option)
very satisfied
satisfied
unsatisfied
very unsatisfied
9. (Required) 9. How satisfied were you with our Spikeroos coaches? (Please tick ONE option)
very satisfied
satisfied
unsatisfied
very unsatisfied
10. (Required) 10. How satisfied were you with the Venue? (Please tick ONE option)
very satisfied
satisfied
unsatisfied
very unsatisfied
11. (Required) 11. How satisfied were you with the registration process? (Please tick ONE option)
very satisfied
satisfied
unsatisfied
very unsatisfied
12. (Required) 12. How satisfied were you with the communication from Volleyball NSW? (Please tick ONE option)
very satisfied
satisfied
unsatisfied
very unsatisfied
13. 13. Do you have any suggestions on how we can make the program more engaging?

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4. (Required) 14. How likely is it that you would recommend Spikeroos to a friend? (Please tick ONE option)
very likely
likely
unlikely
very unlikely
5. (Required) 15. How likely are you to attend another Spikeroos event? (Please tick ONE option)
5. (Required) 15. How likely are you to attend another Spikeroos event? (Please tick ONE option)
very likely

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