TCU PLACE
SASKATOON'S ARTS & CONVENTION CENTRE

CLIENT EVALUATION FORM

For faxing or conventional mail purposes. If you prefer to send in your evaluation via the internet, please complete the online form.

Name of Group: _____

Name of Event: _____

Event Date(s): _____

Location (Room): _____

Number of Guests: _____

TCU Place Sales Executive: _____

TCU Place Event Coordinator: _____

Please answer the following questions:

SECTION 1 - PRE-EVENT: SALES TEAM					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Knowledge & professionalism of Sales Staff	❍	❍	❍	❍	❍
Consideration of your event's needs	❍	❍	❍	❍	❍
Contracting Procedures	❍	❍	❍	❍	❍
Effectiveness of Communication	❍	❍	❍	❍	❍
Sales Staff Responsiveness	❍	❍	❍	❍	❍
Comments:					

SECTION 2 - PRE-EVENT: EVENTS TEAM					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Knowledge/professionalism of Events Team	❍	❍	❍	❍	❍
Consideration of event needs	❍	❍	❍	❍	❍
Effectiveness of communication	❍	❍	❍	❍	❍
Coordinator's responsiveness	❍	❍	❍	❍	❍
Comments:					

Please fax your completed evaluation form to 306.975.7804 Attention Monica Smishek or mail to #35 – 22nd Street East, Saskatoon, SK, S7K 0C8.

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SECTION 3 – AT EVENT					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
How welcome did you feel	❍	❍	❍	❍	❍
Team's ability to problem solve	❍	❍	❍	❍	❍
Team attitude	❍	❍	❍	❍	❍
Support during event	❍	❍	❍	❍	❍
Comments:					

SECTION 4 – FACILITY					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Room comfort/atmosphere	❍	❍	❍	❍	❍
Overall condition of facility	❍	❍	❍	❍	❍
Temperature control	❍	❍	❍	❍	❍
Accuracy of room sets	❍	❍	❍	❍	❍
Maintenance of washrooms	❍	❍	❍	❍	❍
Effectiveness of signage	❍	❍	❍	❍	❍
Deliveries/loading facilities	❍	❍	❍	❍	❍
Comments:					

SECTION 5 - FACILITY SERVICES					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Response time	❍	❍	❍	❍	❍
Sound and light	❍	❍	❍	❍	❍
Audio visual	❍	❍	❍	❍	❍
Electrical & high speed	❍	❍	❍	❍	❍
Handy Special Events	❍	❍	❍	❍	❍
Security (if applicable)	❍	❍	❍	❍	❍
Comments:					

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SECTION 6 - FOOD & BEVERAGE					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Understanding of needs	❍	❍	❍	❍	❍
Food quality & presentation	❍	❍	❍	❍	❍
Service quality	❍	❍	❍	❍	❍
Prompt service	❍	❍	❍	❍	❍
Coffee service	❍	❍	❍	❍	❍
Comments:					

SECTION 7 – POST EVENT					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Invoice clarity	❍	❍	❍	❍	❍
Invoice accuracy	❍	❍	❍	❍	❍
Invoice timeliness	❍	❍	❍	❍	❍
Comments:					

SECTION 8 – TOTAL EXPERIENCE					
	WOW	**exceeded expectations**	**met expectations**	**did not meet expectations**	**disappointed**
Overall value of price paid	❍	❍	❍	❍	❍
Overall service	❍	❍	❍	❍	❍
Overall facility	❍	❍	❍	❍	❍
Comments					

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We welcome your comments. Where did we excel, and where could we improve?
Comments:

Which team members were especially helpful? Please let us know so we can recognize them.
Comments:

Would you recommend TCU Place if someone asked for a referral? Yes ❍ no ❍

Evaluated by (name & title)**:** _____

Telephone #: _____

Date: _____

Date of your next event: _____

Please fax your completed evaluation form to 306.975.7804 Attention Nadine Seidle or mail to #35 – 22nd Street East, Saskatoon, SK, S7K 0C8.