



EVENT FEEDBACK FORM



Thank you for attending our event. We would appreciate your honest feedback to help us produce fantastic events in the future that will help your career and allow you to network.

Name: _____ Age: _____

Event attended: _____

Are you a member of the NI: *(please tick)*

Yes ☐ No ☐

Would you say it was worth attending this event today?

Yes ☐ No ☐

How did you find out about this event?:

What did you value most about this event:

What would you like to see improved for future events:

What event would you like to attend in the future
(existing or new ideas):

Any other comments:

How do you rate the following: *(please tick)*

The pre-event information:

The running of the event on the day:

The content of the event:

The speaker:

The venue:

The food/refreshments (if applicable):

Excellent Good Average Not good Terrible

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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☐ If you are not happy for us to quote you in future marketing material, please tick here.

