

Name:

Age: School:.....

Activity:.....

How often did you go & for how long? e.g. once a week for 3 months

.....

How much did it cost? (if you know)

Did you think the activity was

Please circle your choice



Brilliant fun



Good



Okay



Boring

If you weren't doing this what would you be doing?

.....

If you could continue this activity at other times such as after school, half term breaks, week-ends etc., would you?



You bet



Maybe



No Way!

Will you continue to do this activity?



Yes



No

If no, why not

What has been the best thing about it?

How would you make it better?

Is there anything else you'd like to tell us?



Thank you very much 😊