

Youth Sports Day Camp, Summer 2009 Camp Evaluation Survey for Kids

Please answer each of the questions below.

1. I had fun at Youth Sports Camp. Yes _____ No _____
2. My favorite thing to do at camp was _____.
3. My least favorite thing to do at camp was _____.
4. I wish we could have
_____.
5. Did you like having a weekly theme for camp? Yes _____ No _____
6. I liked the crafts at camp. Yes _____ No _____
7. My favorite craft project was _____.
8. My least favorite craft project was
_____.
9. The Counselors were nice. Yes _____ No _____
10. The Counselors were fair. Yes _____ No _____
11. I would like to return to the Youth Sports Camp. Yes ____ No ____

Thank You!
Hope you have a great summer!