



Party Evaluation

Mad Science of the Bay Area

We at Mad Science are committed to providing the finest in children's science programs. As a Mad Science customer, your opinion is important to us. Please take a moment to answer the following questions. Thank You.

Parent/Guardian's Name: _____ Phone Number: _____

Child's Name: _____ Age: _____ Party Date _____

On a scale of 1-10, please rate the following:

1 = Lowest10 = Highest

Please circle your response:

- | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|----|
| 1. Did Mad Science help you to achieve your goal?
(I.e.: entertaining and enjoyable for the children, easy to organize etc.) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 2. Were you satisfied with the attention given to the birthday child? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 3. Was the children's attention engaged by the party? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 4. Was the instructor able to harness the children's energy? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 5. Did Mad Science help to initiate or heighten the children's interest in science? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 6. Do you feel you received good value for the price? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 7. Would you recommend Mad Science to others? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Please check all that apply:

- | | | | |
|--|--|---|---|
| 8. What, if anything, would you change about the program? | <input type="checkbox"/> Nothing | <input type="checkbox"/> Equipment | <input type="checkbox"/> Hands-on activities |
| | <input type="checkbox"/> Instructor | <input type="checkbox"/> Demonstrations | <input type="checkbox"/> Explanations |
| | <input type="checkbox"/> Arrival time | <input type="checkbox"/> Clean up time | <input type="checkbox"/> Interaction w/children |
| 9. Which, if any, programs would interest you in the future? | <input type="checkbox"/> Workshops/In school field trips | <input type="checkbox"/> Camps | |
| | <input type="checkbox"/> Events | <input type="checkbox"/> Parties | <input type="checkbox"/> Courses |
| 10. May we use you as a reference? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

Comments:

Please return to Mad Science, 5409 Central Avenue, Suite 6, Newark, CA 94560 or FAX to 510-792-2791

Thanks!