DOUGLAS PARK SOCCER CLUB

PARENT SATISFACTION SURVEY U-_____/_____ BOYS OR GIRLS
(Team Name)

Please circle Y (Yes) or N (No)

1. I believe that the Team provided an environment for my child that was:

   Safe …….. Y N Skill Based ……. Y N

   Fun …….. Y N Fair …… Y N

   Comments: _____

2. Because of their experiences our Child has increased their knowledge and

   understanding of: Soccer …….. Y N

   Rules of the Game …… Y N

Comments: _____

3. Is information provided from the Club clear and easy to understand? Y N

   If not, why not? _____

Please rate the following questions on a scale from 1 – 4, with 1 being poor and 4 being very good.

4. I can easily approach and talk to the coaches about my child 1 2 3 4

   Fair play and Sportsmanship is promoted at all levels of play 1 2 3 4

   If I had a problem at the team level, I would feel comfortable contacting the Age Group Coordinator 1 2 3 4

   Practices were well coordinated and developmentally progressive 1 2 3 4

   I am satisfied and would recommend this Club to other Families/ Players 1 2 3 4

   I am satisfied with the level of instruction provided by the Coach 1 2 3 4

5. Upon accessing the Club, did you encounter any difficulties? (i.e.: Registration process, Communication etc.) If yes, please explain: _____

   _____

6. What do you like best about the team? _____

   _____

7. What would you change to make things better? _____

   _____

8. Are planning to return to the Club next season? Y or N
   If no, please explain why, thanks. _____

   _____

Return to Douglas Park Community Centre "Soccer File" or by email to any Board Member (under "Club Directory" at http://www.douglasparksoccer.ca)