GCY Program Evaluation Survey

Thank you for taking the time to give the GCY Swim Team your input. Your feedback will be kept CONFIDENTIAL and used to help us improve our programming for the next year.

*Which squad did your swimmer(s) participate in?					(Please circle one)					
Mako Swim League	AG1	AG2	Senior Prep	Senior	National					
*Which site did your swimmer(s) practice at the most? (Please circle one										
Bryan Ragsdale	e Reidsv	ille	Spears							
*It is preferred that you to us significant time was spent at				r if in different	practice gro	oups, and	for	each	site	e if
Coaching										
(Please circle the number tha		•	ır opinion. 1=Pc	or 2=Fair 3=Go	ood 4=Very				•	_
Coaches' knowledge of comp						1 1	2	3	4	5
Coaches' professional attitude and appearance Coaches' organization of practices								3	4	5
Coaches' approachability and accessibility								3	4 4	5 5
Coaches' ability to relate to your child							2	3	4	5
Coaches' swim meet interactions and feedback							2	3	4	5
Overall Program										
(Please circle the number tha	t best describ	es you	ır opinion. 1=Po	or 2=Fair 3=G	ood 4=Very	Good 5=E	xce	llent	:)	
Athletic Development						1	2	3	4	5
Team Organization						1	2	3	4	5
Distribution of Meet Informa	tion					1	2	3	4	5
Meet Entry Procedure						1	2	3	4	5
Did your child have a fun and positive experience during the 2011-2012 season?							2	3	4	5
YMCA's branch level support	for the team					1	2	3	4	5
Communication	£i	·· · · · · ·		/DI	-:! \					
The most effective method o			-		circle one.)	hat Casa	h	:+	Dro	ctico
Social Media E-mails GCY web-site Telephone/Text W Have you attended a parent meeting?							hat Coach said at Practice Yes No			
How often did you visit the G	_			(Dlagge	circle one \	16	:5	IN	U	
•	ery 2-3 days		Weekly Mo	onthly What w	circle one.) eb-site?					
Will your swimmer(s) return	next season/y	/ear?				Ye	!S	No)	
What team activity/event did	l your swimm	er(s) e	njoy the most? _							
What activities would your sv	vimmer(s) be	intere	sted in for the f	uture?						
Please add any additional cor	mments, ques	tions /	concerns, ideas	for next seaso	n:					

Please use the back of form for additional space – You may turn- in completed forms at the <u>front desk</u> at Bryan YMCA, mail to Bryan YMCA, 501 W. Market Street, Greensboro, NC 27401, fax to Bryan YMCA at 336-272-4140 Please complete and return or before May 25th