



## 2009 International Boating and Water Safety Summit Evaluation

Please assist us in improving future Summits by completing this evaluation form and returning it at the Awards Banquet or dropping it off at the Registration Desk.

Please Check One:	EXCELLENT	GOOD	FAIR	POOR
1. How would you rate the overall Summit experience?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. How would you rate the Summit Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. How would you rate the usefulness of the information received?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. How would you rate the overall experience considering your prior expectations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. How would you rate the Summit registration procedure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. How would you rate the Summit notification materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. How would you rate the overall quality and knowledge of speakers and sessions you attended?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. How would you rate the following:				
a. Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Hotel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Accessibility (i.e. Air / Auto)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please Check One:	YES	NO
9. Would you recommend the International Boating & Water Safety Summit to other professionals?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are you planning on attending a future Summit?	<input type="checkbox"/>	<input type="checkbox"/>

11. What other topics would you like to see presented at future Summits?

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12. Did you like the in/on water breakout sessions?

Full Day

Half Day

Prefer Classroom Only

13. List any speakers and/or topics you would recommend for future Summits.

14. What recommendations do you have to improve future Summits?

15. When visiting the exhibiter area, which booth did you find the most interesting and/or educational? Why? What other exhibitors would you like to see at future Summits?

16. What amenities do you prefer be near or on the hotel property? (i.e. beaches, resorts, villas, open spaces, water taxies, proximity to downtown shopping and dining)

When would you prefer future Summits to be held?  
(Please circle your answer)

Early March

Mid March

Late March

Early April

Mid April

Late April