

2025 Annual Gathering Festival Feedback Form

Thank you for attending the 2025 Annual Gathering Festival! We value your feedback to help us improve future events. Please take a few minutes to share your thoughts.

Description

Please fill out this form and click submit.

Nar	ne *
Fi	rst Name
La	st Name
Em	ail *
	s address will receive a confirmation email
	low would you rate your overall experience at the tival?
0 1	Excellent
0	Good
0 1	air
0 1	Poor
2. F	low satisfied were you with the organization of the nt?
0	Very Satisfied
0	Satisfied
0	Neutral
0 1	Dissatisfied
0	Very Dissatisfied
3. V	Which activities did you participate in? (Select all that
	Kids' Activities (Bouncy Castle, Arts and Crafts, Splash Zone, Magic Show)
	Sports
	Norship Evening with Resonance
	Sunday Service
	Live Lounge / Open Mic
	Other
	low would you rate the quality of the activities?
	Excellent
	Good
0 1	
0 1	Poor
	low satisfied were you with the food and eshments provided?
0	Very Satisfied
0	Satisfied
0 1	Neutral
	Dissatisfied
0	Very Dissatisfied
	low would you rate the venue and facilities at Cleeve

O Excellent

○ Fair ○ Poor	
7. Do you have any suggestions for improving future Annual Gathering Festivals? (Please provide details)	
8. Any additional comments or feedback you would like to share?	
Submit	