



# Participant's Evaluation Form

Event/Feature	Score	Comments
Friday night reception	0 1 2 3 4 5	
Friday night LifeRing meeting	0 1 2 3 4 5	
Sat a.m. Legal rights breakout	0 1 2 3 4 5	
Sat a.m. Pioneer Experience breakout	0 1 2 3 4 5	
Sat a.m. Relapse Prevention breakout	0 1 2 3 4 5	
Sat a.m. "It Almost Runs Itself" breakout	0 1 2 3 4 5	
Lunch Saturday (where did you go?)	0 1 2 3 4 5	
Saturday afternoon with William L. White	0 1 2 3 4 5	
Saturday night banquet: food	0 1 2 3 4 5	
Saturday night banquet: venue	0 1 2 3 4 5	
Saturday night banquet: music	0 1 2 3 4 5	
Sunday morning Delegates' Assembly	0 1 2 3 4 5	
The conference center facility	0 1 2 3 4 5	
The LifeRing volunteer staff	0 1 2 3 4 5	
The event folder and written materials	0 1 2 3 4 5	
The whole experience	0 1 2 3 4 5	
Would you recommend participation next year to your friends?	NO YES Not Sure	
Will you participate next year?	NO YES Not Sure	
Anything else?		

**Thank you for your feedback!**