



After Activity Feedback

ACTIVITY	DATE
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CIRCLE AS MANY WORDS AS YOU WOULD LIKE TO DESCRIBE THIS ACTIVITY.

- | | | | |
|-------------|-------------|---------------|---------------|
| fun | informative | terrible | disappointing |
| exciting | educational | boring | stodgy |
| fantastic | uplifting | uninteresting | mediocre |
| joyous | instructive | disastrous | pointless |
| encouraging | enjoyable | unpleasant | dull |
| interesting | relaxing | horrible | stressful |

DO YOU THINK THIS ACTIVITY WAS WELL-PLANNED? YES NO

WHAT WOULD HAVE MADE THIS MORE ENJOYABLE FOR YOU?

WHAT'S YOUR FAVORITE ACTIVITY YOU HAVE DONE WITH OUR WOMEN'S MINISTRY GROUP?

CIRCLE THE TYPE OF WOMEN'S GROUP ACTIVITIES THAT YOU WOULD LIKE TO SEE PLANNED.

- | | | |
|---------------|---------------|-----------------|
| Craft Night | Museum Trip | Swimming |
| Game Night | Orchard Trip | Walk/Hike |
| Go Out to Eat | Shopping Trip | Cooking Class |
| Movie Night | Spa Night | Women's Retreat |

Other:



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