



BOARD OF DIRECTORS SURVEY (optional) Rev. 10/2008

Dear Parents, Coaches and Referees:

Please provide us with some input! **We'd like to improve our program in any way we can.**

Name _____ Phone _____

Team _____ Age Group _____

Please circle the answer which best describes the issue from 1 - 5, with 5 being the best:

- Registration: We found registration and process to be easy and convenient. 1 2 3 4 5
 - *Coaching*: Information was accessible at registration. 1 2 3 4 5
 - *Refereeing*: Information about our Referee Program was easily available at registration. 1 2 3 4 5

- Class III:
 - I received adequate information about the program. 1 2 3 4 5
 - I understood the player and coach selection process and goals of the program. 1 2 3 4 5

- Season:
 - *Coaching*: I was contacted by my coach in a timely manner. 1 2 3 4 5
 - *Experience*: Overall, we had a positive experience on the team and in game play. 1 2 3 4 5

Comments:

Board Issues:

- Would you be interested in becoming a coordinator?
Yes No If Yes, which position? _____
- Web Site: www.northwestoaks.org
Were you aware of our web site? Yes No
How can we improve it?

Please return this survey to the Northwest Oaks Youth Soccer Club Board of Directors at 1415 Fulton Rd #205-C232, Santa Rosa, CA, 95403 by 11/31/08.