



PARENT/GUARDIAN FEEDBACK FORM

TETTENHALL TIGERS VOLLEYBALL CLUB

To help us improve the club we welcome feedback from parents and guardians of junior members. We should be grateful if you could take a few moments to complete this form.

Name (optional):

Age group of child:

Training day:

Name of coach:

Please circle the relevant number next to each statement:

Not at all (1) – Very much (5)

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|--|---|---|---|---|---|
| My child enjoys attending club training sessions. | 1 | 2 | 3 | 4 | 5 |
| My child enjoys representing the club in competitions. | 1 | 2 | 3 | 4 | 5 |
| My child has improved his/her standard of performance. | 1 | 2 | 3 | 4 | 5 |
| The coach has a good rapport with my child. | 1 | 2 | 3 | 4 | 5 |
| I feel my child is safe at the club. | 1 | 2 | 3 | 4 | 5 |
| The club is well organised. | 1 | 2 | 3 | 4 | 5 |
| Junior club membership offers value for money. | 1 | 2 | 3 | 4 | 5 |

Will your child be joining next year?

Is there anything that you are unhappy with at the club?

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Is there anything that we could do to improve the junior club?

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 Thank you.

Please return to: