## **Woodlands Adventure & Outdoor Learning Evaluation**

## Residential - Day Visit - 1/2 day - Birthday Party - Camping

Please complete this form and return to the office after your visit. These forms and the information on them are used to help us obtain charitable grants towards new equipment

| Name of Group:                |        |       |         |      |               |           |            |              |
|-------------------------------|--------|-------|---------|------|---------------|-----------|------------|--------------|
| Date of Visit:                |        |       |         |      |               |           |            |              |
| Where Did You Hear About Us:  |        |       |         |      |               |           |            | ?            |
|                               |        | 4-6   |         | 7-10 | 1             | 1-15      | 16-18      | Over 18      |
| Female                        |        |       |         |      |               |           |            |              |
| Male                          |        |       |         |      |               |           |            |              |
|                               |        | LOVE  |         | LIKE |               | OK<br>••• | DISLIKE    | WOULDN'T DO  |
| Accommodation                 |        |       |         |      |               |           |            |              |
| Camp Site                     |        |       |         |      |               |           |            |              |
| Assault Course                |        |       |         |      |               |           |            |              |
| Zip Wire                      |        |       |         |      |               |           |            |              |
| Archery                       |        |       |         |      |               |           |            |              |
| Canoeing/Kayaking             |        |       |         |      |               |           |            |              |
| Climbing/Abseiling            |        |       |         |      |               |           |            |              |
| High Ropes                    |        |       |         |      |               |           |            |              |
| Raft Building Vines & Bridges |        |       |         |      |               | +         |            |              |
| Orienteering                  |        |       |         |      | +             |           |            |              |
| Geo Cache                     |        |       |         |      |               |           |            |              |
| Shelter Building              |        |       |         |      |               |           |            |              |
| Tomahawk                      |        |       |         |      |               |           |            |              |
| Favourite Activity:           |        |       |         |      |               |           |            |              |
| Disliked Activity:            |        |       |         |      |               |           |            |              |
| Were<br>The<br>Staff          | Polite | Helpf | Helpful |      | Understanding |           | Supportive | Professional |
|                               |        |       |         |      |               |           |            |              |
|                               |        |       |         |      |               |           |            |              |

Health and Safety talk given and all Medical/Behavioural information documented

**Give a Safety** 

Talk

Give De-

**Briefs** 

Introduce

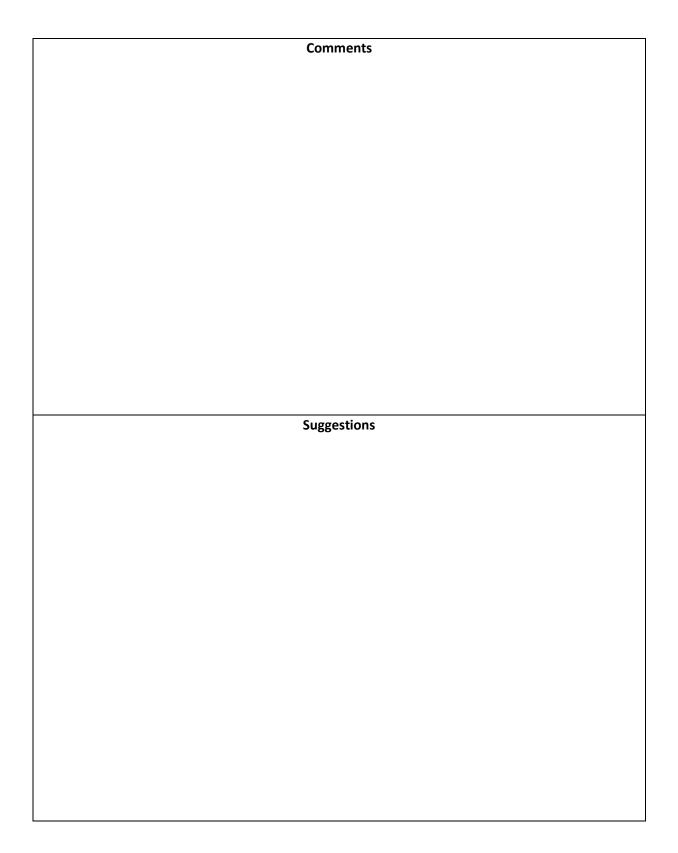
Themselves

**Give Clear** 

Instructions

**Did The** 

Staff



Can We Use This Form For Our Website?