UNIT FEEDBACK FORM

Phone:

Like many events, we will begin working within a month to make next year's sale even better for everyone. Therefore, we are asking you to take a few minutes to rate the following aspects of this year's sale, giving us your comments in the appropriate spaces.

	Agree				Disagree
The information was clearly and timely communicated to you by the Council.	5	4	3	2	1
The Kickoff presentation was beneficial.	5	4	3	2	1
The order forms for Show & Sell and Take Order worked well.		4	3	2	1
Online forms were easy and convenient to use.	5	4	3	2	1
The prizes and rewards are appropriate.	5	4	3	2	1
The product pick-up from the Council drop site was efficient and well organized.	5	4	3	2	1
My experience was so satisfying that I'll do it again.		4	3	2	1
My District Kernel was helpful.	5	4	3	2	1
The Council Popcorn Program is well run and organized.	5	4	3	2	1

Please tell us a few focus areas as we develop next year's plan: Ideas would include additional marketing opportunities, procedures, and community resources. Let us know by placing an * by most important item in your view.

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2				
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Please feel free to provide ac	lditional comments here: Staff support, Pi	ick up/Distribution, Kickoff Kits, etc.		
		Unit Number:		
Name:	Position:			
Email:				

For your convenience, download this form at: www.erieshorescouncil.org/popcornforms

Or fill out form online at: www.erieshorescouncil.org/popcornfeedbackform

DUE BY NOVEMBER 11, 2021