

Evaluation
2009 Minnesota Conference Annual Meeting
“Together, we will be renewed!”

The Annual Meeting Planning Work Group values the feedback it receives from delegates. We review your comments and consider your suggestions for future meetings. Please indicate on this form how many meetings you have attended and give us your comments. Please place the completed form in one of the boxes located at the doors, the Registration Table, or mail it to the Conference Office: 122 West Franklin Avenue, Suite 323, Minneapolis, MN 55404. Thanks for sharing your opinions.

Including this 2009 gathering, I have attended _____ (how many?) Annual Meetings.

I am a _____ Lay Delegate; _____ Clergy Delegate; _____ Non-Delegate Attendee

Please rate all of the elements you experienced during this weekend, using this scale:
 1=Poor 2=Okay 3=Good 4=Excellent N/A=Not Applicable

- | | | |
|--------------------------------------|--|----------------------------|
| ___ A/V Integration | ___ Housing Accommodations | |
| ___ After Hours Activities | ___ Keynote: Paul Nixon | ___ Registration Process |
| ___ Childcare/Children’s Programming | | ___ Keynote: Susan K Smith |
| ___ Resolution Process | ___ Pre-meeting publicity | ___ Awards Celebration |
| ___ Exhibit Area | ___ Meeting Facilities | ___ Workshops |
| ___ Food | ___ Music leadership | ___ Worship |
| ___ Timing of Conference (date) | ___ Length of Conference (no. of days) | |

What was your favorite part of this year’s Annual Meeting?

What could we do to improve next year’s Annual Meeting?

Any other comments you’d like to share? --

If you would like to help plan future Annual Meetings at the College of St. Benedict, please give us your name, phone number, and email address. Thank you!

Name: _____ Area of Interest: _____ Phone: _____ Email: _____