

VISITOR FEEDBACK

Q1. What did you like the most?

Q2. What did you dislike the most?

Q3. What would you like to see added next year?

Q4. How did you find out about the May Fayre?

Press/Radio Flyer/Poster Word of mouth Events Guide Web

Other (please specify):

We and our funders would like to have some information about you and the people you came with. It will be completely confidential and will help us to get grants next year.

Q6. How many of you are? Male Female

Q7. What are the age ranges of your group? (please state numbers)

0-5 6-15 16-19 20-39 40-64 65+

PLEASE TURN OVER

Q8. How many in your group describe themselves as disabled?

Q9. What is the employment status of you and your group? (please state numbers)

Working full time Working part-time Looking after home/family Unemployed
 Self-employed Retired Permanently sick/disabled
 Full-time student Training scheme Other

Q9. How would you describe the ethnic groups of your party? (please state numbers)

| White | Black | Asian | Mixed | Chinese or Other |
|--------------------------------------|--------------------------------------|--------------------------------------|--|----------------------------------|
| British <input type="checkbox"/> | Caribbean <input type="checkbox"/> | Indian <input type="checkbox"/> | White / Black Caribbean <input type="checkbox"/> | Chinese <input type="checkbox"/> |
| Irish <input type="checkbox"/> | African <input type="checkbox"/> | Pakistani <input type="checkbox"/> | White / Black African <input type="checkbox"/> | |
| | | Bangladeshi <input type="checkbox"/> | White / Asian <input type="checkbox"/> | |
| Other White <input type="checkbox"/> | Other Black <input type="checkbox"/> | Other Asian <input type="checkbox"/> | Other Mixed <input type="checkbox"/> | Other <input type="checkbox"/> |

For Others please specify:

Q10. How many of your group consider themselves pagan?

Please hand this form in at any information point or to any volunteer wearing a necklace ID.