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| 1. **Did you enjoy today’s session?** *Please circle your answers* |
| Yes / No  Please comment: |
| 1. **What did you like about today’s session?** *Please circle you answers* |
| Food / meeting new people / fun / questions to chat about / activities / other  Please comment: |
| **Activities** *Please circle your answers* |
| 1. **What activities did you get involved in?**   <add in list of activities you are running>   1. **Did you enjoy the activities at today’s session?**   Yes / No  Comments:   1. **Was there anything that stopped you taking part in the activities today?**   Health conditions / disabilities / not interested / other  Comments: |
| **Volunteering** *Please circle your answers* |
| 1. **Did you realise you were volunteering by doing the activities?** 😊😊😊   Yes / No  Comments: |
| 1. **Knowing you have volunteered today –  by taking part in these activities  – how does that make you feel?** |
| 1. **Before the session how did you feel?**   **P.T.O** |
| 1. **After the session how did you feel?** |
| **Finally, please help us at <insert your organisation’s name> if you can, by answering the following questions:** |
| 1. **Have you volunteered in the past or currently?** *Please circle your answers* |
| *E.g. washing up at your church, helping at a fete, knitting to raise money for charity*  **Yes / No**  If ‘Yes’, what volunteering activities you have taken part in? Please comment: |
| 1. **If you don’t currently volunteer, what are the reasons?** *Please circle your answers* |
| * Lack of confidence to try something new * My health * My mobility * Not enough time * Worried about the commitment * Too many responsibilities (caring etc.) * Other (please comment) |
| 1. **After taking part in the small volunteering activities today, are you more likely to consider volunteering in the future?** *Please circle your answers* |
| Yes / No / Maybe  Comments: |

**Please give your name to be entered into a prize draw at the end of the session!**

**First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**