



Name: (Optional) _____

Age Group: (Please circle) <18 | 18-39 | 40-59 | 60-74 | 75+

Male

Female

1. How long have you been associated with the club? _____
2. What has been the level of your involvement e.g. player, volunteer? _____
3. What do you think are the best aspects of the club? _____

4. In terms of the running of the club, what is done well? _____

5. In terms of the running of the club, what could be done better? _____

6. What improvements would you like to see in the club? _____

7. Would you recommend this club to others? Yes No
8. If no, could you please indicate why not? _____

9. What do you think sets this club apart from other Bowling Clubs? _____

10. How would you describe the culture of the club? _____

THANK YOU FOR COMPLETING THIS SURVEY.

Please return it to: _____
(Name)

or place in the return box located: _____ by: _____
(Detailed location) (Closing date)