

Workshop Feedback:



Workshop Title: _____ Date: _____

Name: _____

Email Address: _____

Company: _____ Phone: _____

	Disagree					Agree				
Because of this workshop, I will change something in the way I run my business	1	2	3	4	5					
The content of this workshop matched my expectations	1	2	3	4	5					
The presenter was knowledgeable about his topics	1	2	3	4	5					
I would recommend this workshop to others	1	2	3	4	5					
The information was presented in such a manner which enabled me to grasp key concepts and ideas	1	2	3	4	5					
I found the workshop – presentation stimulating	1	2	3	4	5					
I would like you to contact me so I can learn more about GMC advisory, consulting and training services				yes				no		
Can we keep your details on our database?				yes				no		
This workshop could be improved by...										
My number one takeaway or action point is ...										
General Comments on today's workshop:										
<i>We would love to use any endorsements from today's workshop. Can we publish your comments for promotional purposes?</i>								yes		no

Please hand in this feedback form at the end of today's workshop