

Please take the time to complete an evaluations form for the Adaptive Sport program in which you participated. This information will be used to help make improvements to programming as well as provide support for the Adaptive Sport programs funded by the Sask Lotteries Trust Fund.

## PARTICIPANT (ADULT) Evaluation Form

Athlete Name:

Club Name:

Sport:

1. What are the top 3 reasons you play your sport?

2. I participate in sports or physical activity

less than 1 x a week      1 - 2 times      3 - 4 times      5 or more

3. This year did your coach(es) Comments

- |                                      |     |    |
|--------------------------------------|-----|----|
| • Help you develop your skills       | Yes | No |
| • Help you develop physically        | Yes | No |
| • Teach you team play and strategies | Yes | No |

4. Were the coaches:

- |                                |     |    |
|--------------------------------|-----|----|
| • Organized                    | Yes | No |
| • Good teachers                | Yes | No |
| • Knowledgeable about the game | Yes | No |

5. What did you like best about this season

6. What did you like the least about this season

7. Do you have any suggestions for improving this sport program (practices, games, coaches, etc.)?