



Family Reading Experience

Thank you for attending our Family Reading Experience!

Please complete the following survey. Your feedback can help us improve the event for families in the future.

- | | | |
|--|------------------------------|-----------------------------|
| We visited every station | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| We had enough time at each station | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The stations were fun | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The stations were useful | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The stations taught me something new | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| We would attend again | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I learned something positive about e-reading | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I would recommend this to other families | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

How did you hear about our event?

What did you enjoy most about this event?

What do you think we could do to improve this event?

After this event, I will (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Read with my child | <input type="checkbox"/> Work with my child on sight words |
| <input type="checkbox"/> Play games with my child | <input type="checkbox"/> Encourage storytelling with my child |
| <input type="checkbox"/> Use more technology with my child | <input type="checkbox"/> Discuss current events with my child |