



City of Cambridge Camps Parent Evaluation Form

We value your input! Please give us your comments, concerns, and recommendations so we can make the Day Camp Program better!

Day Camp Site: _____ Leaders: _____

Getting the Word Out!

How did you find out about this program? (circle all that apply)

Program flyer Activities Guide Friend School Other: _____

Impressions of the Program from You and Your Child

Please rate the overall quality of the Day Camp Program: Poor Fair Good Excellent

Please comment on the Day Camp facility: _____

Please rate the overall performance of the leaders: Poor Fair Good Excellent

Comments: _____

What did your child like **best** about the program? _____

What did your child like **least** about the program? _____

What are your thoughts on...

Day Camp visitors: _____

Off-site trip locations: _____

On-site activities: _____

On-site crafts: _____

Getting Your Thoughts

Did you find this program affordable in comparison to similar programs? Yes No

Would you be interested in specialty programming, if so what?

Final Thoughts:

Please provide us with any other suggestions you may have that will help us improve our Summer Day Camp Programs:

Thank-you for your input!

