Parent Feedback Form

If you would please provide your name and contact information, it will help us towards meeting your needs and providing a quality Scouting program to your child:

Name

Phone

Email

Scouter Name

Pack/Troop Name

We are on a journey to new heights, so please provide us with your feedback to help us get there!

On behalf of the ______, thank you for taking the time to complete this feedback form. Your input will help us ensure that we continue to offer great, safe Scouting adventures to your young Scout. Please discuss the questions with your child and where relevant include both of your comments.

Overall, how satisfied a	re you with the Progra	im?		
Very Satisfied	Satisfied	Neutral	Unsatisfied	Very Unsatisfied
Provide one example that	reinforces your selection	:		
Would you recommend	our Scouting group to	your neighbours or fr	riends?	
Definitely	Probably	Unsure	Probably Not	Definitely Not
Why or Why Not?				
Would you register with	n this Scouting group ir	1 the future?		
Definitely	Probably	Unsure	Probably Not	Definitely Not
Please tell us why:				
Has your Scout tried new adventures and experiences that they have not tried before?				
Is your Scout learning how to be a good leader and a good team member?				

Are you adequately involved in your Scout's program? Have you been invited to participate?

Were there any aspects of the Scouting program that did not meet your expectations? What and why?

