



PERFORMANCE EVALUATION

Fax it Back!
We can't wait to hear from you!
360-438-3614

Your Name/Company	Date of Event	Party Outfitters' Leader

Thank you for giving us the opportunity to serve you during your special event. Your participation in this evaluation is very important to me. We want to do the best job possible for you, and your feedback gives us the opportunity to improve and to serve all of our clients better. Please be candid in your evaluation of our services. Your input is much appreciated and I look forward to hearing from you!

Mark A. Thibodeau
President

Please place and X in the appropriate box to the right and make any Additional comments below or on reverse side as necessary.	EXCELLENT	GOOD	POOR	N/A
PRE-EVENT				
Staff leader introduced him/herself				
Appearance of staff leader, uniform & grooming				
Appearance of additional staff, uniform & grooming				
Staff leader appeared to be in control of setup, was organized				
Games were fully set up and staffed prior to start time of event				
EVENT				
Cleanliness & operation of games and equipment				
Host-provided staff (if applicable) were adequately trained on operation and safety of games; training was clear				
Staff leader appeared to be <u>in control</u> and performed adequate Supervision of event				
Staff leader and additional staff (if applicable) were present <u>at all times</u> to supervise the games; they did not leave the direct area				
Attitude/motivation of staff leader and additional Party Outfitters' staff was positive and pleasant				
POST-EVENT				
Staff kept games operating until contract end time				
I felt like I was "served" during my event and felt reassured that everything would go well				
Staff leader checked out with me at the completion of the event to make sure that I was happy with the service				
Our expectations were met with regards to games & Services of Party Outfitters, overall rating of event				

Additional Comments (use back of this form if necessary): _____

Please send a FREE catalog to my friends:

Name _____ **Company** _____ **Phone** (____) _____
Address _____ **City** _____ **State** _____ **Zip** _____
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