**Event/campaign questionnaire**

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| **Please complete the short questionnaire below. The answers will help us evaluate this event/campaign and plan future events/campaigns.** | | |
| Did you learn anything new from our event/campaign? | Yes | No |
| Are you likely to contact any of the local/national charities or organisations highlighted at the event/campaign? | Yes | No |
| Are you taking away any resources to read? | Yes | No |
| What did you like most about the event/campaign? | | |
| How can we improve events/campaigns in future? | | |
| Is there a topic you would like to see covered in a future event/campaign? | | |
| **Some questions about you** | | |
| What is your sex? | Male | Female |
| Intersex | Prefer not to say |
| How old are you? | Under 18 | 18-24 |
| 25-34 | 35-44 |
| 45-54 | 55-64 |
| 65 or over | |