

**Source it Here! 2015 Event Survey**

**Each survey completed will be entered to receive a gift certificate!**

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**Please Enter your Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Why did you attend this event? (Check all that apply)**

* Interested in meeting new contacts for my business
* Looking for new customers/suppliers
* Keynote speakers
* Tradeshow
* Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Are you a Taste Real Partner ? \_\_\_ Foodlink/Buy Local Buy Fresh Partner? \_\_\_**

**3. Please rate the components of the event:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **I did not attend this session** | **Not useful** | **Somewhat useful** | **Very useful** |
| **1. Keynote Addresses** |  |  |  |  |
| **2. Networking Lunch** |  |  |  |  |
| **3 Local Food Talk Show** |  |  |  |  |
| **4. Ask the Expert Sessions** |  |  |  |  |
| **5. Tradeshow** |  |  |  |  |

**4. Please rate the logistics of the event:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Great** | **Good** | **Poor** |
| **Location** |  |  |  |
| **Time of day** |  |  |  |
| **Time of year** |  |  |  |
| **Length of the event** |  |  |  |
| **Registration** |  |  |  |

**5. Do you feel the ½ day is a suitable length of time to host this event?**

* Yes – keep the event ½ day. There was enough time to cover topics of interest, questions and networking
* No – We need more time. Let’s make it a full day next year!

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**6. Overall, how would you rate the event?**

* Great
* Good
* Poor

**Any feedback or suggestions for future programming is greatly appreciated!!**

**7. Would you attend this event again?**

* Yes
* No

**8. Are there specific topics of interest that should be considered for 2016?**

**9. Who is missing? Do you know of an industry or a business that wasn’t represented today that would benefit from this event?**

**10. Would you like to be involved in Source It Here next year?**

* **Yes, as a SPEAKER**
* **Yes, as a VOLUNTEER**
* **Yes, as a member of the PLANNING COMMITTEE**

**Name and contact (optional, but required to be in the draw) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thank you for your feedback!**

**Any questions? We want to hear from you.**   
Christina Mann, Taste Real Coordinator [christinam@wellington.ca](mailto:christinam@wellington.ca) www.tastereal.ca

Anna Contini, Manager Foodlink Waterloo Region [acontini@foodlink.ca](mailto:acontini@foodlink.ca) www.foodlink.ca