

# Event Feedback Survey Template

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GeneralBlue

## Basic Information

Event Name:	
Date of Event:	
Event Location:	

## Overall Experience

How satisfied were you with the event overall?	Very Satisfied ○	Satisfied ○	Neutral ○	Dissatisfied ○	Very Dissatisfied ○
What did you enjoy most about the event?					
What could be improved for future events?					

## Event Components

Please rate the following aspects of the event. Feel free to customize them according to your event’s specific elements.

(Rating Scale: 1 = Poor, 5 = Excellent)

Component	1	2	3	4	5
Registration Process	○	○	○	○	○
Event Organization	○	○	○	○	○
Venue/Location	○	○	○	○	○
Speakers/Presenters	○	○	○	○	○
Activities/Entertainment	○	○	○	○	○
Food & Beverages	○	○	○	○	○

## Engagement & Value

Did the event meet your expectations?	Exceeded Expectations ○		Met Expectations ○		Fell Short of Expectations ○
How likely are you to attend a future event by us?	Very Likely ○	Likely ○	Not Sure ○	Unlikely ○	Very Unlikely ○

## Additional Feedback

Any additional suggestions?	
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