Croquet NSW
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PACE Coaching Session Survey

Complete this Survey Form after attending a PACE Coaching Session

Demographic information

Age: **Gender identity:** **Post code:**

1. (Required) Which Club was your coaching session held at?

2. (Required) What date was your session held

____/____/_____

3. (Required) Which session did you attend? (Please tick ONE option)

- ☐ GC Foundation
- ☐ AC Foundation
- ☐ RC Foundation
- ☐ Gateball Foundation
- ☐ GC Talent

4. (Required) How would you rate the session overall? (Please circle ONE option)

Where 10 is outstanding and 1 is poor

N/A 0 1 2 3 4 5 6 7 8 9 10

5. (Required) How would you rate the content of the session? (Please circle ONE option)

Where 10 is outstanding and 1 is poor

N/A 0 1 2 3 4 5 6 7 8 9 10

6. (Required) The Presenter(s) had excellent knowledge of their subject? (Please circle ONE option)

Not Applicable Strongly Disagree Disagree Neutral Agree Strongly Agree

7. (Required) This session met my expectations (Please circle ONE option)

Not Applicable Strongly Disagree Disagree Neutral Agree Strongly Agree

Accessed at 05 Nov 2026 at 18:51:08

8. What was the best thing you learned from the session?

9. What would you like to see done differently next time?

10. Would you attend a further PACE coaching session? (Tick all that apply)

- [ ] Yes
- [ ] No
- [ ] Maybe

11. Any other comments?

12. Would you be interested in training as a coach? (Tick all that apply)

- [ ] Yes
- [ ] No
- [ ] Maybe

13. Add your email address if you are interested in coach training or a follow up from the Coaching Co-ordinator

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