

DATE _____

Dear BLOCK Fest™ Host,

Please help us determine the statewide impact of BLOCK Fest™ by completing this brief survey.

1. Was your BLOCK Fest™ provided as a (check all that apply):

- Community-wide event
- Parents as Teachers group meeting
- Other: _____

2. How many sessions (1 hour) did you host? _____

3. Please describe attendance at your BLOCK Fest™ event(s):

_____ # of Children
_____ # of Adults _____ # Men _____ # Women (if you know)
_____ # of Staff (paid staff)
_____ # of Volunteers
_____ # of Handbooks distributed _____ English _____ Spanish

4. Were there any special characteristics of your participants?

(e.g., special needs, Spanish speaking, etc.)

5. Did you have any sponsors for the event or use the event as a fundraising opportunity?

If yes, please describe.

6. Did more than one program collaborate to offer BLOCK Fest™ in your community?

Please describe the partners.

7. Did you have any media coverage?

8. Please share your opinions about the ease of set-up, packing up, transporting and implementing BLOCK Fest™:

9. Additional comments:

BLOCK Fest™ Host: _____

Location: _____

Exhibit date(s): _____

Please e-mail your completed survey along with your Event Summary form and any additional comments related to your BLOCK Fest™ experience to:

blockfest@twigafoundation.org

Thank you for your input!