**Little Kids Night Survey**

We would like to know how we are doing and how much you and your children liked this event.

0 = dislike very much 5 = enjoy very much

**Cost of event**  0 1 2 3 4 5

**Material taught** 0 1 2 3 4 5

**Length of event** 0 1 2 3 4 5

**Activities involved**  0 1 2 3 4 5

(Dinner, Hair, Nails, Craft, Cheer, Face Painting, Photo Booth)

**Retrieval of photos** 0 1 2 3 4 5

We would also like to hear any feedback, positive and/or negative, you are willing to share with us. Remember, we really want to know what we can do to add or change for next year!

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Additional Comments:

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Thank you for your time and feedback!