

2009 PYAA FASTPITCH Evaluation

DUE MAY 23, 2009

Team Name: _____

Head Coach Name: _____

Child's Name (optional): _____

Rank the following by circling the number from 1 (very poor) to 10 (excellent)

You child's experience this year with PYAA FASTPITCH:

1 2 3 4 5 6 7 8 9 10

The parent's overall experience this year with PYAA FASTPITCH:

1 2 3 4 5 6 7 8 9 10

Your family's past experience with PYAA FASTPITCH (previous years if applicable)

Year: _____ 1 2 3 4 5 6 7 8 9 10

Head Coach:

Overall: 1 2 3 4 5 6 7 8 9 10

Organization 1 2 3 4 5 6 7 8 9 10

Sportsmanship 1 2 3 4 5 6 7 8 9 10

Kid Friendly 1 2 3 4 5 6 7 8 9 10

Teaching ability 1 2 3 4 5 6 7 8 9 10

Other Comments:

Assistant Coach Name: _____

Sportsmanship 1 2 3 4 5 6 7 8 9 10

Teaching ability 1 2 3 4 5 6 7 8 9 10

Kid Friendly 1 2 3 4 5 6 7 8 9 10

Assistant Coach Name: _____

Sportsmanship 1 2 3 4 5 6 7 8 9 10

Teaching ability 1 2 3 4 5 6 7 8 9 10

Kid Friendly 1 2 3 4 5 6 7 8 9 10

Fields and Grounds:

Appearance 1 2 3 4 5 6 7 8 9 10

Safeness 1 2 3 4 5 6 7 8 9 10

Visibility / Seating 1 2 3 4 5 6 7 8 9 10

Other Comments:

Concession:

Pricing 1 2 3 4 5 6 7 8 9 10

Quality 1 2 3 4 5 6 7 8 9 10

Friendliness 1 2 3 4 5 6 7 8 9 10

Other Comments:

How many times did you work concession this year? 1 2 3 4 5 or more

Would you be willing to help in any capacity with PYAA fall or spring fastpitch softball ____ Yes ____ No

If yes, in what capacity, and how can we reach you? _____

Suggestions for improving our PYAA FASTPITCH Program: (please continue on back)

DUE BY: May 23, 2009. Please give to your team parent, division director, fax to 403-3609 or email to pyaasoftball@hotmail.com. Your feedback is important. Your evaluations help us in coach selection for next year! Thank you!!!! PYAA FASTPITCH Board