

# Camp Karankawa Evaluation

To assist the Council in its continuing efforts to upgrade and improve our camps, please provide feedback.

**Dates Attended:** \_\_\_\_\_ **Pack:** \_\_\_\_\_ **District:** \_\_\_\_\_ **Council:** \_\_\_\_\_

**# of Scouts in Camp:** \_\_\_\_\_ **# of Adults in Camp:** \_\_\_\_\_ **Campsite #:** \_\_\_\_\_

**Camp Leader:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Program:**  Resident Camp

	very unsatisfied					very satisfied	N/A
	1	2	3	4	5		
Overall satisfaction with Camp Karankawa							
Staff helpfulness and friendliness							
Camp Director responsiveness to needs							
Registration process							
Arrival/check in process							
Schedule/rotations							
Physical facilities (campsites, restrooms, dining hall, program areas)							
Food service							
Trading Post							
Cost of camp							
Overall Program							
Archery							
BB							
Crafts							
Campfire							
Pool							
Other: _____							

Which camp staff member(s) helped you the most? Why? *Please list name(s).*

Which activities did you enjoy most?

Which activities did you enjoy least?

What valuable skills did you / your son learn at Camp Karankawa?

Do you want to come back to Camp Karankawa?     Yes     No

Does your son want to come back to Camp Karankawa?     Yes     No

Would you recommend Camp Karankawa to others?     Yes     No

**Suggestions:** *Please provide specific feedback on any area marked 3 or below on page 1.*

This evaluation form is shared with our camp staff and reviewed by administrative to improve the program. Please return this form before you leave camp or email: \_\_\_\_\_

We appreciate your feedback.