



2025 CAQ AC Women's Singles 58738

The survey results will be used by the Events Coordinator as part of the monthly report to the CAQ MC to help them make decisions regarding future tournament regulations and schedules. When no feedback is received from a number of players, it will be interpreted as total satisfaction of the event.

If you are outlining a problem in any of your responses, please give a suggestion on how to remedy the problem.

Your survey input is completely anonymous unless you add your name and does not collect any demographic information about you.

Please complete by 11 August.

Thank you for your time.

This survey is conducted in accordance with our Data Collection Privacy Policy. <https://www.croquetqld.org/surveys/privacy>

1. (Required) Venue of Tournament

2. (Required) Your role (Please tick ONE option)

a player

an official

3. Are you satisfied with the entry fee? (Please tick ONE option)

yes

no

4. Comments - fee \$

5. Are you satisfied with the number of days of the tournament? (Please tick ONE option)

yes

no

6. Comments - no of days

7. Are you satisfied with the number of games played? (Please tick ONE option)

yes

no

8. Comments - # of games

9. Are you satisfied with length (time) of the games? (Please tick ONE option)

yes

no

10. Comments - time

11. Are you satisfied with the tournament format? (Please tick ONE option)

round robin, XYZ, Swiss etc

yes

no

12. Comments - format

13. Are you satisfied with the date/scheduling of the tournament? (Please tick ONE option)

yes

no

14. Comments - date

15. Are you satisfied with the venue/s? (Please tick ONE option)

yes

no

16. Comments - venue

17. Are you satisfied with the officials at the tournament? (Please tick ONE option)

yes

no

18. Comments - officials

19. Are you satisfied with the communications regarding the tournament? (Please tick ONE option)

yes

no

20. Comments - info

21. Are you satisfied with the catering at the tournament? (Please tick ONE option)

yes

no

22. Comments - catering

23. Any other comments or suggestions

24. Your name (optional)
