

5-7 june



## Marketex Conference Questionnaire

Sessions attended:

- 5th       6th  
 7th       All

Please evaluate the conference's subject matter and quality of speakers by filling in this brief questionnaire. This will help us to ensure that the conference continues to be of value and relevance to you in the future. Thank you.

**Q1.** Please provide any general comments you have on any of the sessions, speakers or conference overall:

**Q2.** How would you rate the conference overall?

- Excellent       Very Good       Good       OK       Poor

**Q3.** How would you rate the following:

	Excellent	Very Good	Good	OK	Poor
Ease of booking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site registration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Catering?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Venue?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Delegate packs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall conference organisation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q4.** How well do you think the conference matched the description in the adverts?

- Exactly       Some what       Reasonably       Not much       Not at all

**Q5.** Please indicate how each of the following influenced your decision to attend the conference:

	Extremely Important	Somewhat Important	Neutral	Not Very Important	Not At All Important
Session content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To meet other members of the industry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional training/development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to do business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q6.** Were there any issues or subjects you would like to have seen included in the conference?

**Q7.** Are you likely to attend the conference next year?

Yes

No

Not sure

**Q8.** Any other comments:

Name:

Job Title:

Company:

Thank you for taking the time to complete this questionnaire.