



Cloud 9 for Life Group

1) How would you rate the course/therapeutic experience?

- A - very satisfied
- B – satisfied
- C – neutral
- D - not satisfied

2) Would you recommend this event/service to a colleague or friend?

- A. Definitely not
- B. Probably not
- C. Probably yes
- D. Definitely yes

3) What do you think this event will have / sessions have had with your practice/ quality of life

- A. None
- B. Some
- C. A lot

4) Describe what this impact was?

5) How could the event/service be improved/different