

2008 ANNUAL CONFERENCE EVALUATION FORM

Please take a few moments to answer the questions below. Your responses will help us assess the strengths and weaknesses of the 2008 Annual Conference and will aid in the planning of future conferences.

1. How do you rate the overall program? Excellent Satisfactory Unsatisfactory

2. What was your favorite session? _____
Why? _____

3. What was your least favorite session? _____
Why? _____

4. What topics and/or speakers would you like to see on the 2009 conference program? _____

| 5. Please rate the following: | Excellent | Satisfactory | Unsatisfactory |
|--|--------------------------|--------------------------|--------------------------|
| a a) Organization of registration | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b b) Vendor booth variety | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c c) Organized activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d d) Hotel meeting rooms | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e e) Conference cost | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. Your feedback is vital to the success of our future conferences. Please comment on any issue you feel warrants the attention of the 2009 conference committee. _____

Name _____ Agency _____

Address _____ Phone Number _____

***Each completed evaluation form will be entered in a drawing for
FREE REGISTRATION FOR CMTA 2009 ANNUAL CONFERENCE**