



# National Soccer Hall of Fame Tournament Evaluation



Team Name: \_\_\_\_\_ Coach: \_\_\_\_\_

E-Mail: \_\_\_\_\_

1. In which age group did you participate?  
 Under 10    Under 11    Under 12    Under 13    Under 14    Under 15    Under 16  
 Boys/Girls college showcase    Men's Open    Over 30    Over 40    Over 50
2. Have you ever participated in The Soccer Hall of Fame tournament? \_\_Yes \_\_No
3. If yes, in what years? \_\_\_\_\_
4. Please check the rating below to indicate your experience:

	Poor	Fair	Good	Excellent
Facilities				
Field Quality				
Officiating				
Organization				
Staff				

5. Were you sent a packet about the tournament rules, schedule and any other relevant information in a timely fashion? \_\_\_\_ Yes \_\_\_\_ No
6. Did you find an adequate housing? \_\_\_\_ Yes \_\_\_\_ No
7. If no, please explain: \_\_\_\_\_  
 \_\_\_\_\_
8. Did you get a chance to visit the museum in the Hall of fame? \_\_\_\_ Yes \_\_\_\_ No
9. If no, why didn't you?  
 \_\_\_\_ No time    \_\_\_\_ Too Expensive    \_\_\_\_ Not Interested    \_\_\_\_ Previously Visited
10. What would motivate your team to return next year? \_\_\_\_\_  
 \_\_\_\_\_
11. Other comments: \_\_\_\_\_  
 \_\_\_\_\_