

TEAM/MANAGER EVALUATION FORM

TOURNAMENT (INCLUDE DIVISION & CLASSIFICATION OF PLAY)		TOURNAMENT SITE	TOURNAMENT DATE	
TEAM NAME	MANAGER'S	NAME		
Please rate the following categories of tournament operation / organization. Your answers will be compiled into an overall report on this USA Softball National Championship event, which will be presented to the USA Softball Council. PLEASE ASSIGN EACH QUESTION A POINT VALUE: (5) EXCELLENT, (4) VERY GOOD, (3) AVERAGE, (2) POOR, (1) UNACCEPTABLE. A RATING LESS THAN 1 OR 2 REQUIRES COMMENTS.				
CATEGORIES:	COMMENTS:	ONNOUL INDEE: A NATING ELSG TIME I ON		INTS:
1. Playing Facilities Quality, Turf, Lighting				
2. Field Maintenance Frequency, Watering, Lining				
3. Tournament Organization Pre-Tournament Information, Manager's Packet Scheduling				
4. Bracket Board Appearance, Size, Readability				
5. Food Concessions Variety, Quality, Service, Price				
6. Manager's Meeting Site, Program, Draw Procedure				
7. Tournament Website Quality of Information, Updates				
8. Tournament Souvenirs Quality, Selection, Price				
9. Communication with Tournament Staff Attitude of Staff				
Please answer the below question only if you stayed at a tournament recommended site: 10. Housing Availability, Affordability, Quality				
			TOTAL:	

GENERAL COMMENTS/RECOMMENDATIONS

Please return this form to the USA Softball Representative prior to you leaving the tournament site. The USA Softball reviews each evaluation for possible improvements for future tournaments.