



On the Journey Retreat Participant Feedback Form

Thank you for attending this retreat.
Please take a few minutes to give us your valuable feedback.

Location of Retreat: _____ Date _____

Facilitator Team: _____

Retreat: *Choice-making* *Emptying Your Cup* *In God's Hands* *Listening* *Transitions*

I appreciate the sacredness of the retreat time. Yes No Somewhat

I like having my own *Personal Journal* for future reflection. Yes No Somewhat

I leave this retreat feeling spiritually nourished. Yes No Somewhat

I liked the structure of this retreat (ritual, reflection, dialogue). Yes No Somewhat

I am motivated to learn more about this subject on my own. Yes No Somewhat

I wish to receive the Within Ministries e-newsletter. Yes No Already Do

E-mail _____

I would like more information about Within Ministries. Yes No

I wish to make a donation to Within Ministries. Yes No

I am willing to be a facilitator at a future 3-hour retreat. Yes No

What was most helpful to me:

What was least helpful to me:

Other spiritual topics that interest me:

Please clearly print your information:

Name _____ Date _____

Community _____

Home Address _____

City _____ State _____ Zip _____

Phone (_____) _____ E-mail (if not provided above) _____

