Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Workshop Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please answer the following questions to the best of your ability

1. What are the three most useful things you learned in the workshop today?

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. What was your favorite part of the workshop?

3. What would change in the workshop?

4. Where are you the most excited to ride? (List the place)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Any other feedback you would like to give us?

|  |  |  |  |
| --- | --- | --- | --- |
| **I feel like I can: *circle what best applies***  |  **Probably Not** |  **Maybe** | **Yes** |
| 1. **Adjust my helmet**
 |  1 2 |  3 4  |  5 |
| 1. **Use the correct hand signals while biking**
 |  1 2 |  3 4  |  5 |
| 1. **Ride a bike safely *on the street* with cars**
 |  1 2 |  3 4  |  5 |
| 1. **Lock my bike securely**
 |  1 2 |  3 4  |  5 |
| 1. **Figure out if something is wrong with my bike**
 |  1 2 |  3 4  |  5 |
| 1. **Use a map to choose a safe bike route**
 |  1 2 |  3 4  |  5 |
| 1. **Merge to make a left hand turn**
 |  1 2 |  3 4  |  5 |
| 1. **Ride my bike in all kinds of weather**
 |  1 2 |  3 4  |  5 |
| 1. **Ride my bike places I want to go**
 |  1 2 |  3 4  |   |