



KSHB 'HAVE A GO' FEEDBACK FORM

Name: _____

Age: _____

Class: _____

- Package: ☐ Introduction to Karting
☐ Briggs Race Day Experience

Please rate your overall experience. 1 being poor and 5 being excellent

1.	Ease of registering your interest	1	2	3	4	5
2.	Punctuality of booking confirmation	1	2	3	4	5
3.	On arrival how would you rate your welcome	1	2	3	4	5
4.	How would you rate the briefing and explanation of karting	1	2	3	4	5
5.	How would you rate the equipment:					
	- Helmet	1	2	3	4	5
	- Suit	1	2	3	4	5
	- Gloves	1	2	3	4	5
	- Condition of Kart	1	2	3	4	5
6.	How would you rate our track and facilities?	1	2	3	4	5
7.	What was the level of enjoyment of your experience?	1	2	3	4	5

What did you like about Karting? _____

What didn't you like about Karting _____

Would you consider becoming a member of KSHB? ☐ Yes ☐ No

Would you recommend the package to others to try? ☐ Yes ☐ No

Are there any other comments you would like to make?
