Fitness Class Feedback Form

Thank you for taking this class. Tell us how it went so we can make every session better. Cross one box per row using a blue or black pen.

Class name and instructor

YOUR CLASS

Please rate your agreement with the following statements.

Please cross one in each line

	Strongly disagree	*Disagree*	*Neutral*	*Agree*	*Strongly agree*
The instructor was motivating and clear	○	○	○	○	○
The class matched its description and level	○	○	○	○	○
The music and atmosphere were good	○	○	○	○	○
The room and equipment were clean and safe	○	○	○	○	○
I got a good workout	○	○	○	○	○

How hard did this class feel?

Very easy ○ ○ ○ ○ ○ Very hard

OVERALL

How likely are you to recommend this class?

Not likely ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ Very likely

What did you love, and what would you change?

To respond ⊗ or ●

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