

Conference Evaluation Form

31st Annual CSA Conference

La Vista, Nebraska

October 17-19, 2008

Your comments and suggestions are valuable and help to further improve this annual conference. Please complete this questionnaire and return to the Registration Area or mail to CSA.

PO Box 31700 • Omaha, NE 68131 • 1-877-CSA-4-CSA • www.csaceliacs.org

Name _____

Address _____

City _____ State _____ Zip _____

Was this your first CSA conference? Yes No

If "No," how many have you attended previously? _____

Are you a: (check all that apply)

- Local CSA Chapter Member # of Yrs _____
- CSA National Member # of Yrs _____
- Conference Volunteer
- Conference Exhibitor
- CSA Governing Board Member
- Healthcare Professional

How did you learn about the conference?

- CSA Website
- Conference Registration Mailing
- Lifeline Newsletter
- Chapter meeting or newsletter
- Other _____

For a October conference, when do you need to receive registration materials?

- May June
- July August

How were your hotel contacts and accommodation?

- Excellent Good Fair Poor N/A

1. The range of topics for your needs was:
 Excellent Good Fair Poor

Comments:

2. The methods used for presentation at the conference were:
 Excellent Good Fair Poor

Comments:

3. The information presented relating to CD was:
 Excellent Good Fair Poor

Comments:

4. The balance and flow of the conference was:
 Excellent Good Fair Poor

Comments:

5. The information and ideas relating to the positive approaches to the celiac diet and lifestyle were:

- Excellent Good Fair Poor

Comments:

6. The amount of structured time was:

- Excellent Good Fair Poor

Comments:

7. The amount of free time was:

- Excellent Good Fair Poor

Comments:

8. Are conference audio recordings beneficial?

- Yes No

9. Would you prefer to have conference recordings available as an option separate from the overall conference registration?

10. Conference costs continue to rise each year and statistics indicate that this trend is likely to continue. It is important to CSA that the conference remains affordable for everyone. This will require changes in conference planning. Please rank the following items from 1-5 in level of importance to the conference experience.

____ Gluten-free meals included in cost of registration

____ Meeting space in same location as accommodations

____ Length of conference

____ Conference speakers and presentations

____ Exhibit Hall

General comments and suggestions:

Thank you for taking the time to share your thoughts.
See you next year!