Participant Evaluation

Today's Date (dd/mm/yy) _____	**Library Name:** _____
	Term: (please circle) 1 2 3 4

Please note this evaluation form is for the use of Sport Southland staff only, your feedback is appreciated

1. Approximately how many Wriggle & Rhyme sessions have you attended this term?

2. Were you a library member before attending the Wriggle & Rhyme programme? Yes No

   If you answered 'no' have you since become a member? Yes No

3. From coming to the sessions over the past term, please tick the key messages you have learnt:

☐ Quality physical movement experiences	☐ Enjoy the time your infant spends crawling before encouraging walking
☐ Tummy time to strengthen muscles used for moving & exploring	☐ Playing with a ball helps develop 'hand-eye' or 'foot-eye' coordination
☐ Eye muscles strengthened when the eyes move	☐ Hand and finger play helps develop fine-motor skills
☐ Allowing child to play outside increases oxygen and endorphins in the blood	☐ Songs, rhymes and finger play develops awareness of different emotions and feelings
☐ Massage teaches baby about the body- size and shape	☐ Children enjoy doing simple repetitive activities
☐ Slow, spinning activities develop vestibular/ motor coordination	☐ None

4. Do you feel confident to apply Active Movement activities at home with your child? Yes No

5. Do you use the Active Movement activities with your child outside of the library sessions? Yes No

6. Have you used the Active Movement resources at home over the past term? Yes No

   If YES, please circle which: *Set of 14 Activity Guides* *DVD Series 1* *DVD Series 2*

7. Is there any way in which we can improve our service to you?

   _____

   _____

8. Would you like to see Wriggle & Rhyme continue at your library in the future? Yes No

   _____

9. Further feedback

   _____

   _____

Thank you