

Appendix 6



ASHTON CENTRAL SWIMMING CLUB EXIT QUESTIONNAIRE

The purpose of this questionnaire is to provide guidance for the committee of Ashton Central Swimming Club to ensure a standard and consistent approach is adopted and to initiate any change in practice.

SWIMMERS NAME/S :-

DATE OF COMMENCEMENT:-

GROUP (on leaving)

DATE OF LEAVING :-

1. What is your reason for leaving?
2. If you are going to another swimming club, where?
3. If you are joining an alternative swimming club which of the following factors were highly influential to your decision?

(*Please tick*)

Club constitution/ rules

Location of pool

Quality of tuition

Lack of the swimmer's development

Discrimination / harassment

Bullying

Others (*please specify*)

4. What were your best experiences?

5. What were your worst experiences?

6. Based on your experience with us, how do you think we can improve?

7. Would you recommend Ashton Central Swimming Club to anyone else?

YES / NO

We would like to thank you for your time in completing this exit questionnaire.

Please return in the stamped addressed envelope provided or if e mailed to you return by e mail.

Ashton Central Swimming Club Committee.