

To help improve our services and to assist in making Basketball New Zealand (BBNZ) tournaments the premium sporting events of their type, all participants will have the opportunity to evaluate the tournament. The evaluation is focused around three main areas; pre-tournament, during the tournament and the structure/format of the tournament. This is your opportunity to have input into the running of a BBNZ tournament so please take the time to complete this evaluation.

Please tick the rating system of 1 - 4:

- 4 – exceeded expected standard
- 3 – met expected standard
- 2 – verging on expected standard
- 1 – failed to meet expectations

<b>Tournament Attended</b>	
<b>Host Association</b>	

<b>Your Involvement</b>	<input type="checkbox"/> Player	<input type="checkbox"/> Coach	<input type="checkbox"/> Manager	<input type="checkbox"/> Spectator	<input type="checkbox"/> Referee
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1. Pre-Tournament – entries / draw / communications				
a) Clarity of entry procedures	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
b) Timeliness and relevance of communications from BBNZ	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
c) Timeliness of the tournament draw	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
d) Assistance from BBNZ pre-tournament	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Comments on pre-tournament communication and information				

2. Tournament				
a) Appropriateness of the tournament facilities	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
b) Standard of officiating at the tournament	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
c) Accessibility and clarity of tournament information	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
d) Assistance from tournament personnel	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Please make any additional comments on the tournament				

3. Structure / Format of the Tournament				
a) Did the tournament cater to the needs of your team?	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
b) How was the structure of the draw?	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
c) How was the general structure of the tournament?	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
<b>Please make any additional comments on tournament structure/format</b>				

4. General				
a) Overall enjoyment of the tournament	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
b) Was assistance from BBNZ readily available?	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
c) Information supplied e.g. completeness & appropriateness?	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
<b>General comments on this tournament and its organisation</b>				

What was the most memorable moment of the tournament?

What was the least memorable moment of the tournament?

Thank you for your time in completing this evaluation; it will be used to improve any areas that are highlighted by the Basketball New Zealand members as needing adjustments. We value your opinion and aim to provide you with the tournaments that you want. Please return this form to the Floor Controller or post to the details listed below.