



Tryon Arts & Crafts

373 Harmon Field Rd
Tryon, NC 28782
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www.tryonartsandcrafts.org

WORKSHOP EVALUATION

Name of Instructor: _____

Name of Workshop: _____

Workshop Dates: _____

To help us better serve you; please share your feelings on the following:

Please give us your comments about the following:

Instructor _____

Content of the workshop _____

Facility, Tools, & Equipment _____

Workshop Fee _____

Supply Fee _____

Other comments: _____

Other workshops you would like to attend _____

How did you hear about this workshop? _____

Would you be interested in volunteer work with the center? _____

This information is completely confidential and is only used by the office for review.

Thank you for your input.

Charlotte Caughman
Weekend Workshop Coordinator
864-473-0317