

## Conference Questionnaire

Name: \_\_\_\_\_

Organisation (if applicable): \_\_\_\_\_

Please write a couple of lines about yourself.

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Where did you find out about this event?

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What is your particular interest in the conference?

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What was/were the highlight(s) of the day for you?

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Please add any suggestions, for improvements in the way the conference was run and/or the programming of future events.

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Would you prefer future events to take place: (tick one or more)

During the week  Over the weekend  or if three days, Fri-Sun

This was a one day event, might you also come to a 2 or 3 day event? Yes / No

Please return this to a member of the Musical Brain team at the end of the day. Alternatively you can post it back to 32a Halford Road, Richmond TW10 6AP. Copies are also available to download from our website ([www.themusicalbrain.org](http://www.themusicalbrain.org)).

This information is very useful to us. Thank you.