

# Culture in Transit Participant Feedback

Have you been to a Queens Memory event before?  Yes  No

How did you hear about the event? \_\_\_\_\_

Did you bring materials to digitize?  Yes  No

Why did you come to this event? \_\_\_\_\_

Did you learn anything new? What did you learn about? \_\_\_\_\_

What was the highlight of the event for you? \_\_\_\_\_

Did you meet anyone new who was ...  from a different generation?

from a different culture?

from your neighborhood?

How could this event have been improved? \_\_\_\_\_

What is your date of birth? (This is so we can understand which age groups we are engaging).

/  /

What is your zip code? \_\_\_\_\_ (So we can know if we are attracting a local audience).

Additional Thoughts \_\_\_\_\_

## Contact Information (Optional)

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_



**QUEENS  
MEMORY**