

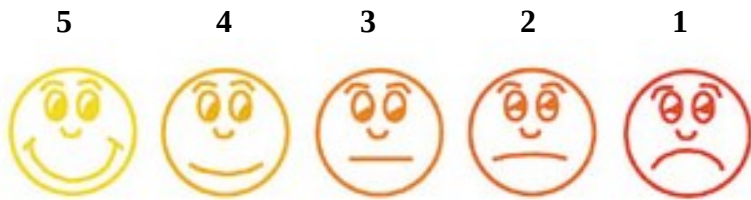


### Chinle Wellness Center (CWC) – Client Satisfaction Survey

**Date of Visit:** \_\_\_\_\_

<b>Client gender:</b>	<b>Client age:</b> ___less than 12 years	___ 13 -17 years
___ Male	___ 18 - 24 years	___ 25 - 39 years
___ Female	___ 40 – 64 years	___ 65 and older

For each statement below circle the number based on this scale:



1. **Today, me to class** **it was easy for get into the and/or use the fitness equipment I wanted to use today.** 5 4 3 2 1
2. **At the Wellness Center, I was given support so I can take care of my own health better.** 5 4 3 2 1
3. **The health information given to me today was helpful.** 5 4 3 2 1
4. **Wellness Center staff was helpful and accessible.** 5 4 3 2 1
5. **The Wellness Center (equipment, restrooms, floor) was clean and in good repair during my visit today.** 5 4 3 2 1
6. **I am sure I can take care of my own health (T’áá hwó’ají t’éego).** 5 4 3 2 1
7. **Usually my health is good.** 5 4 3 2 1
8. **I would recommend this wellness center to my family and friends.** 5 4 3 2 1

**What did we do well today?**

\_\_\_\_\_

**How can we do better? We know we need a bigger facility and are working on it. Is there anything else we can improve?**

\_\_\_\_\_

Wellness Center staff to complete this section:

- \_\_\_ General
- \_\_\_ Personal Training
- \_\_\_ Fitness Assessment
- \_\_\_ New Member Orientation
- \_\_\_ Group Fitness Class: \_\_\_\_\_

Staff: \_\_\_\_\_

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