Wellness Champions
Choose Health. Live Well.

QUAD CITY Health Initiative

Moon Walk 2009

Team Captains Survey
Moon Walk 2009

Thank you for your support of Moon Walk. Please answer the following questions to help us plan for next year.

Team Captain Name_____ **Team Name**_____

1. **What worked best about Moon Walk this year?**

2. **What needs to be improved or changed about Moon Walk?**

3. **Would you be willing to be a team captain again next year?**

4. **Other Comments?**