Supervisor Mary Joyce D'Aurizio

Town of Irondequoit
Irondequoit Parks and Recreation Department
1280 Titus Avenue, Rochester, NY 14617
www.irondequoit.org

Submit E-Mail
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QUESTIONNAIRE
CAMP EASTMAN

1. Date of usage: _____ Name (opt.)_____

2. Lodge/Cabin: ☐ Conference Center ☐ Kusak ☐ Irondequoit Rotary
   ☐ Irondequoit Veterans Memorial ☐ Eastridge Kiwanis

3. Was your usage for ☐ Business ☐ Pleasure/Recreation

4. Condition of building upon arrival: ☐ Excellent ☐ Fair ☐ Poor
   Comments:

5. Camp Eastman personnel were: ☐ Friendly ☐ Helpful ☐ Other
   Comments:

6. Have you used Camp Eastman before? ☐ Yes ☐ No

7. How would you describe the facility compared to your previous use(s).
   Comments:

8. Would you recommend Camp Eastman to your friends/business associates?
   ☐ Yes ☐ No
   If not, why not

9. Additional Comments/Suggestions:

10. Do you wish to be placed on the **2013** Mailing List?(name)_____
    Address:_____