

# WE WANT TO HEAR FROM YOU!

## MAJOR LEAGUE SOFTBALL (MLS) SURVEY

Thank you for giving the Parks, Recreation & Community Services Department (PRCSD) the opportunity to serve you better. Please help us by taking a few minutes to tell us about the service you received. We appreciate your business and want to exceed your expectations.

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

Mens/Womens/Co-Ed: \_\_\_\_\_

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

League/Div/Day: \_\_\_\_\_

Location: \_\_\_\_\_

	Excellent	Good	Satisfactory	Unsatisfactory
Registration process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
League communications with teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Field Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Circle Field Location:

• Reid • UCR • Hunter Hobby

**Method of registration (circle one):**

• League Gamesite • MLS Website • Other



Parks, Recreation and  
Community Services

PLEASE COMPLETE REVERSE SIDE

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How many players do you have on your roster? How many non-resident? Yes No

Do you think the Registration fee is reasonable compared to other softball leagues? Yes No

Comment: \_\_\_\_\_

How did you hear about the league? **(circle one):**

- Social Media
- Friend
- Website
- PRCSD Activity Guide
- Other

Please share comments, ideas, or suggestions to help us improve. Thank you.

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**If you would like to be contacted, please provide the following information:**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

**#ILoveRiversideParks**

**951.826.2000**

