

Come & Try Review and Evaluation Report

Event Name: _____

Date: _____

Location: _____

Coordinator: _____

Coaches/Volunteers: _____

Event Overview

Purpose of the event: (e.g., introduce new riders to the club, grow junior membership, promote safe cycling)

Target audience: (e.g., ages 5–12, adults, beginner riders)

Event format: (e.g., skills stations, short rides, safety briefing)

Weather conditions:

Attendance

Registered participants: # _____

Attendees on the day: # _____

New-to-club riders: # _____

Spectators/parents: # _____

Notes:

Activities Delivered

Summary (skills, stations, group rotations):

Safety & Incidents

Incidents/injuries: _____

First aid provided: _____

Risk controls used: _____

Feedback

Participant feedback (key points):

Coach/volunteer feedback:

Outcomes & Impact

Key achievements:

(e.g., number of participants expressing interest in joining, skill improvements observed, strong parent engagement)

Membership/Follow-up actions:

Number of families requesting more information: _____

Sign-ups to newsletters or programs: _____

Planned next events:

Resources & Costs

Costs:

Coaching: _____

Equipment: _____

Venue: _____

Consumables: _____

Promotion: _____

Funding sources:

(e.g., grants, club budget, in-kind support)

Recommendations for Future Events
