

Name of Event:

Number in group:

Submit completed form to be entered into a drawing. Winner will be selected at the end of the challenge.

Name:

Gender:

Age:

(If additional space is needed, please write on the back)

1. How did you like the event or meal? (What was your overall impression of the event?)

2. Please list at least one thing you learned? (How concretely did this event increase your knowledge?)

3. Would you be willing to eat one plant based (vegan) meal a week? (How did this event influence your dietary behavior change, or desire to be a community activist as a result?)

4. What might keep you from eating more plant based (vegan) food? (What are your constraints for personally taking on dietary behavior change?)

5. What else would you like to learn about plant base (vegan) eating? e.g., recipes?