

Please complete this survey about the 2017 Convention

1. I participated in the convention as:										
Select one.										
0	O Parent/Guardian									
0	Professional Provider									
0	O Scientist									
0	PWSA Chapter Representative									
0	Exhibitor									
0	Guest/Speaker									
0	Other									
2. Plea	2. Please rate the following General Sessions on Friday, November 17 th and Saturday, November 18th:									
		5- Excellent	4	3	2	1-1	Poor	Did Not Attend		
	Opening Ceremonies	0	0	0	0		0	0		
	Overview of Clinical Trials with Q & A			0	0		0	0		
	Friday Luncheon: Sharing Sessions	0	0	0	0		0	0		
Sa	aturday Luncheon: International, National and Chapter Updates	0	0	0	0	,	0	0		
Clos	ing Ceremonies: YIP, YAP, & Sibling Production	0	0	0	0	(0	0		
	Comme	nts								
	3. Please rate the following breakout sessions for Friday, November 17:									
Select o	one per row.				<u> </u>	<u> </u>				
		5-Excellent		4	3	2	1- Poor	Did Not Attend		
	Speech Therapies	0		0	0	0	0	0		
	Muscle, Bone, Balance & Tone	0		0	0	0	0	0		
Tran	sition Planning and Resources for Young Adults with PWS	0		0	0	0	0	0		
Shut	Shut Up About Your Perfect Kid; Ready for Takeoff – OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO						0			

Mom Get Out of the Way							
Therapeutic Interventions		0	0	0	0	0	0
Multi-Sensory Approach to Improving Brain Function		0	0	0	0	0	0
Psychiatric Medications		0	0	0	0	0	0
Inclusion and Least Restricted Environment under IDEA – Your Child's Legal Rights		0	0	0	0	0	0
СОММ	ENTS	;					

4. Please rate the following breakout sessions for Saturday, November 18:							
Select one per row.							
	5- Excellent	4	3	2	1- Poor	Did Not Attend	
No Magic Diet for PWS	0	0	0	0	0	0	
Raising Your Child with PWS: Beyond Protection to Preparation	0	0	0	0	0	0	
Building Hopes, Dreams and Self-Esteem	0	0	0	0	0	0	
Advocating for the Person with PWS in the ER	0	0	0	0	0	0	
From Fear to Fearless	0	0	0	0	0	0	
Applied Behavior Analysis – Dispelling Myths & Improving Behavior	0	0	0	0	0	0	
OH NO FIVE-O! A Guide to Prevention and Education with Law Enforcement	0	0	0	0	0	0	
Long Term Supports – Your Adult Child's Legal Rights to Receive Appropriate Care & Services	0	0	0	0	0	0	
Taking Care of the Care Giver	0	0	0	0	0	0	
Preparing for Your Child's IEP	0	0	0	0	0	0	
Best Practices on GI Issues in PWS	0	0	0	0	0	0	
Grandparents: A Grandparent's Love	0	0	0	0	0	0	
Supplements	0	0	0	0	0	0	
Therapeutic Interventions	0	0	0	0	0	0	
Preparing Your Medical Team for Hospital Stays or Surgery	0	0	0	0	0	0	
Depression and Mental Health in Parents Coping with PWS	0	0	0	0	0	0	
Comments							

5. Please	e rate the hotel for this year's convention.	
Select on	9.	
0	5-Excellent	
0	4	
0	3	
0	2	
0	1-Poor	
0	Did not stay	
		1
6. Please	e rate the meal options for this year's convention.	
Select on).	
0	5-Excellent	
0	4	
0	3	
0	2	
0	1-Poor	
0	NA	
7. Please	e rate the registration process for this year's convention.	
Select on	9.	
0	5 - Excellent	
0	4	
0	3	
0	2	
0	1- Poor	
		1
	e rate the YIP Program.	
Select on	<i>ż.</i>	
0	5 - Excellent	
0	4	Ť
0	3	Ť
0	2	Ĭ
0	1- Poor	Ĭ

9. Please	rate the YAP Program.	
Select one.		
0	5 - Excellent	
0	4	
0	3	
0	2	
0	1- Poor	
10. Please	e rate the Sibling Program.	
Select one.		
0	5 - Excellent	
0	4	
0	3	
0	2	
0	1- Poor	
ransport	mportant is it to you that the convention be located close to Disney and provide free ation to Disney?	
0	5 – Extremely important	
0	4	
0	3	
0	2	
0	1- Being close to Disney does not factor into our decision to attend	
10 \\\\	did you most gain from this convention?	
ız. wiidt	did you most gain from this convention?	

13. What was your overall impression of the convention?					
Select one	9.				
0	5-Excellent				
0	4				
0	3				
0	2				
0	1-Poor				
14. Pleas	se provide any additional comments or suggestions you may have regarding the convention.				
15. Name	e (optional)				

Thank you very much; please send to:

PWSA (USA) 8588 Potter Park Drive, Suite 500 Sarasota, FL 34238 or

email: development@pwsausa.org