

**THE SPECTACLES YARGAN TOURS OCT 2007 – APRIL 2008
FEEDBACK FORM**

DATE _____ **NAME** _____

PHONE _____ **MOB** _____ **E MAIL** _____

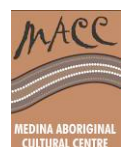
ADDRESS _____

COMMENTS

ANY SUGGESTIONS

**WHERE DID YOU HEAR ABOUT THE SPECTACLES YARGAN TOURS PLEASE CIRCLE
BROCHURE NEWSPAPER WEBSITE WORD OF MOUTH OTHER PLEASE SPECIFY**

**CAN WE PUBLICISE YOUR COMMENTS AND NAME FOR FUNDING AND MARKETING PURPOSES?
PLEASE CIRCLE YES NO**



Department of Environment and Conservation



Kadjiny Mia
Centre for Aboriginal Learning
TAFEWA

