Playtesting Form

1. Please tell us your gender. (Click the appropriate box)

Male

Female

Other

Prefer not to say

1. What’s your age? (Please select from the drop-down menu below)

21 - 25

1. What was your first impression of the game? (Please select from the drop-down menu below)

Good

1. What did you think of the level theme? (ice)

It worked well with the rest of the game

It kind of worked with the rest of the game

It didn’t really work with the rest of the game

It didn’t work with the rest of the game

1. What did you think of the camera in the game?

It was too zoomed in

It was about right

It was too zoomed out

1. What did you think of the pace of the game, overall?

It was too fast

It was about right

It was too slow

1. What did you think about your character’s movement speed?

It was too fast

It was about right

It was too slow

1. Did the power ups make the game more enjoyable? Why?

No because I couldn’t really see where they were to use them

1. Did you have fun playing the game?

Yes

No

1. Would you play the game again?

Yes

No