

"Socket Dialogues" Workshop Audience Feedback

4 Jul 2022 Deptford Town Hall

Please fill in this feedback form and return it to the workshop coordinator before you leave.

How satisfied were you with the workshop overall?

| | 1 | 2 | 3 | 4 | 5 | |
|----------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------|
| Not very | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | It was great |

How engaged in the performance did you feel?

| | | | | | | |
|-----------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-----------------|
| Zoned out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Fully engrossed |
|-----------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-----------------|

How satisfied were you with the implementation of the mobile device score?

| | | | | | | |
|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------|
| Didn't work at all | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Worked very well |
|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------|

Did the consequences of your actions match your expectations?

| | | | | | | |
|-----------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|-----------------------------------|
| I couldn't comprehend what was going on | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I clearly understood the outcomes |
|-----------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|-----------------------------------|

Would you like to participate in another networked music performance?

| | | | | | | |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|----------------|
| Never again | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Definitely Yes |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|----------------|

What were the most satisfying aspects of the performance? (Tick up to 3 that apply)

| | | | |
|-------------------------------------------|---------------------------------------------------|-----------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Music | <input checked="" type="checkbox"/> Mobile Score | <input checked="" type="checkbox"/> Musicians | <input type="checkbox"/> Other specify below: |
| <input type="checkbox"/> My participation | <input checked="" type="checkbox"/> Interactivity | <input type="checkbox"/> Digital audio | |

Any additional comments regarding the workshop?