

# "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 |

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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 |
|-----------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-----------------|

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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 |
|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|------------------|

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Did the consequences of your actions match your expectations?

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

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Would you like to participate in another networked music performance?

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

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

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

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Any additional comments regarding the workshop?

I came late so I didn't quite understand what was going on but once I ~~so~~ started interacting it was really fun and I didn't mind that much about understanding.

Music & expression is what interests me most and I was very impressed and satisfied with what I was hearing.