




Preventing Falls Together

~a program of 
Collaboration • Communication • Action

Please help us determine if this project has been successful by answering the following questions and returning the completed form to a coalition member or by mailing it to Community Links, P.O. Box 29103, Halifax, NS, B3L 4T8 or by faxing it to (902) 422-9322.

Name of your place of worship: _____

Contact Person: _____

Mailing Address: _____

Postal Code: _____

Telephone: _____

Email: _____

1. Did you participate in this project last year (Nov., 2005)? yes no
2. Did you use the bulletin inserts provided this year, for Falls Awareness Day 2006?

yes If yes, approximately how many were used? _____

no If no, please explain so we can improve in the future.

3. Did you use the *Fall Proof Your Place of Worship checklist*?

no

yes If yes: a. Did you find it useful? yes no

b. Did you make any changes in or around your building to reduce the risk of falls? yes no

c. Please tell us about any changes you made.

4. Would you be willing to participate in this project next year?

yes no If no, please let us know the reasons why not.

5. Please share any suggestions and comments.

Preventing Falls Together is Funded by
The Nova Scotia Department of Health Promotion and Protection

Thank You!