

# 2024 PAUMCS Annual Conference Evaluation Form

Memphis, TN April 4-6, 2024

Your comments concerning this year's PAUMCS conference will help us to plan for future events. Please complete this sheet and leave it in the box at the registration/Ask Me table before you leave on Sunday, email the form to [BLockhart@umcdiscipleship.org](mailto:BLockhart@umcdiscipleship.org), or mail this form by April 20<sup>th</sup> to: Brenda Lockhart, PAUMCS, 640 Atlanta Drive, Hermitage, TN 37076.

***Please complete BOTH sides. Please PRINT clearly.***

*Feel free to write additional thoughts about the conference and/or organization on a separate piece of paper. Thank you for taking the time to share.*

General Groups	Helpful Comments
PAUMCS Registration	
Opening Session	
Worship/Devotions	
Day 1 Dr. Ashley Boggan, session 1 Mr. Todd Cox, session 2	
Day 2 Mr. Todd Cox, session 2 cont Ms. Clara Ester, session 3	
Day 2 – Session 4 Civil Rights Museum or Dr. Mike Bowie, online	
Day 3 Dr. Cynthia Bond Hopson, session 5	
Annual Business Meeting	
Southern Soiree Celebration Banquet	
Displays and Exhibitors	

Would you and your chapter be interested in hosting this conference in the future?  YES  NO

Chapter \_\_\_\_\_

Contact Info \_\_\_\_\_

How did you hear about this Conference? \_\_\_\_\_

How did you participate in this Conference - in-person or online? \_\_\_\_\_

If online, did you have any issues, and if so, what? \_\_\_\_\_

\_\_\_\_\_

Suggestions for future topics, speakers or program agenda \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Suggestions, ideas, dreams, comments for the PAUMCS organization \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On a scale from 1-10 (least likely to most likely), would you participate in a Mission Opportunity? \_\_\_\_\_

**Personal Church Affiliation:**

United Methodist  Other: Please Specify: \_\_\_\_\_

**My employment/volunteer situation is most closely described as:**

<input type="checkbox"/> Local congregation size of 1-249	<input type="checkbox"/> District Office	<input type="checkbox"/> Other, specify
<input type="checkbox"/> Local congregation size of 250-499	<input type="checkbox"/> Conference Office	_____
<input type="checkbox"/> Local congregation size of 500-999	<input type="checkbox"/> Episcopal Office	_____
<input type="checkbox"/> Local congregation size of 1,000 or more	<input type="checkbox"/> General Agency of UMC	

Name (optional) \_\_\_\_\_

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*Thank you for taking the time to provide feedback! YOU are appreciated!*