

## Hard Hats for Little Heads Event Survey

**EVENT LOGISTICS**

1. What was the date of your event? \_\_\_\_\_
2. Was your event a:  Bike rodeo  Health fair  School giveaway  Community event  Fitness event  
 Other: \_\_\_\_\_
3. Did any community partners help with the program?  Yes  No If yes, please name partners and their contribution.  
\_\_\_\_\_
4. Was your HHLH giveaway part of a larger event?  Yes  No If yes, please describe, including other participating organizations. \_\_\_\_\_
5. How many helmets did you give away? \_\_\_\_\_ Of those, how many went to underserved, or low-income, children? \_\_\_\_\_  
How many were given to kids who have a bike? \_\_\_\_\_
6. Did a physician participate in your event?  Yes  No If yes, please list name, specialty, and the role he or she played.  
\_\_\_\_\_
7. Did the media in your community cover your event?  Yes  No If yes, was it:  Newspaper  TV station  Radio station  
Please name: \_\_\_\_\_  
Send copies of news articles to TMA's outreach coordinator (see contact information below).

**OUTREACH MATERIALS**

8. Did you use the helmet safety DVD?  Yes  No If yes, did you use it to:  Train volunteers  
 Educate children/parents at your event  Other (please specify): \_\_\_\_\_
9. Which outreach materials were the most helpful to your event (check your top two choices)?  
 Promotional flyer/envelope stuffer  Helmet safety DVD  Safety/helmet fit brochure  
 Pledge sheet  Helmets Are Cool poster  Logo banner
10. Did you use Spanish-language HHLH outreach materials?  Yes  No If yes, which ones? \_\_\_\_\_
11. Where did you hear about the Texas Medical Association's Hard Hats for Little Heads (HHLH) program?  
 TMA Web site  E-mail  TMA meeting  TMA publication (please name) \_\_\_\_\_  
 Other (please specify): \_\_\_\_\_
12. How did your HHLH event benefit your practice and/or organization? \_\_\_\_\_
13. Would you sponsor a HHLH giveaway again?  Yes  No If no, why not? \_\_\_\_\_

**FEEDBACK**

14. Other comments/suggestions about the HHLH program and/or how the program can be improved. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Name:\* \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Return to:** Tammy Wishard at [tammy.wishard@texmed.org](mailto:tammy.wishard@texmed.org) or by fax to (512) 370-1693. Copies of news articles can be faxed to (512) 370-1693 or sent to Tammy Wishard, Texas Medical Association, 401 W. 15th St., Austin, TX 78701.

*\*Comments from your survey may be used by TMA or the TMA Foundation (TMAF).  
By signing this form, you give TMA and/or TMAF permission to use your written feedback.*



Hard Hats for Little Heads  
Physicians Caring for Texans