**Community**

**Survey**

Dear Community Residents,

We are gathering information to plan cultural, recreation, and leisure services in your neighborhood. Your participation in this survey is voluntary but your response is very important. Individual responses will be kept confidential.

Thank you for your help.

**Information about the Survey**

**How long is this survey?**

There are two parts to the survey: Community Information and Recreation and Community Participation. If all questions are answered, the survey should take no more than 10 minutes to complete.

**Who should answer the questions?**

Please give the survey to the ADULT. Only one survey per household should be completed.

**Do you have to answer all of the questions?**

Your participation on this survey is **voluntary.** You are free to refuse to answer any question on the survey.

**Why do we want this information?**

The information you share will be used to improve the services provided to you and those in your household.

**Community Information**

1. **How many years have you been in your community?**
	1. □ 1 year □ 1 to 3 years □ 3 to 9 years □ 10+years
	2. Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (for location in the community)
2. **How many members of your household are in the following age group?**

**(Please enter the number in each category)**

 \_\_\_Under 4 \_\_\_5 to 9 \_\_\_10 to 14 \_\_\_15 to 19 \_\_\_20 to 24

\_\_\_25 to 29 \_\_\_30 to 39 \_\_\_40 to 59 \_\_\_60 to 69 \_\_\_70 to 79

\_\_\_ Over 80

1. **Which of the following best describes your housing status?**

Type of Residence

 □ Single Family Dwelling

 □ Apartment

□ Duplex/Triplex/Townhouse

 □ Other (please describe):

1. **What do you like about living in your community?**

1. **a) What issues and/or concerns do you have about your community?**

 **b) Please list suggestions for change to your community.**

**Programs and Special Event Information**

1. **How often would you like to see Programs offered in your community?**

□ once a month

□ once every 3 months

□ once every 6 months

□ once a year

□ never

1. **What kind of programs would you like to see?** Please check ONE box per activity.

|  |  |  |  |
| --- | --- | --- | --- |
|   | **I am interested in a program about this in our community** | **No need for a program about this in our community** | **I would be interested in helping run this program** |
| Gardening, flowers, planting | □ | □ | □ |
| Visiting a museum, art gallery, live theatre | □ | □ | □ |
| Doing sports (e.g. volleyball, basketball, hockey, etc.)  | □ | □ | □ |
| Doing a craft or hobby (e.g. photography, woodwork, sewing) | □ | □ | □ |
| Taking part in the arts (e.g. drama, music, drawing, writing) | □ | □ | □ |
| Dancing (e.g. social, folk, ballet, jazz) | □ | □ | □ |
| Walking the neighbourhood as part of a Neighbourhood Watch group | □ | □ | □ |
| Jogging, Running | □ | □ | □ |
| Outdoor Activities | □ | □ | □ |
| Cycling on trails/streets | □ | □ | □ |
| Mountain bike riding on challenging terrain | □ | □ | □ |
| Social Club (cards, reading, etc) | □ | □ | □ |
| Cooking Group (community kitchen, etc) | □ | □ | □ |
| Playgroup | □ | □ | □ |
| Other (please specify):  | □ | □ | □ |

**Please include your contact information (phone number, e-mail, etc) if interested in helping.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Please specify program you would **Most Like to See Start in your commuNity.** (Name **ONE** program only.)

1. **How often would you like to see Special Events offered in your community?**

□ once a month

□ once every 3 months

□ once every 6 months

□ once a year

□ never

1. **What types of special events should be held?**

1. **Where in the neighbourhood would you like to see events or programs held?**

1. **How often do you use the following facilities or sites for activities and recreation?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Never** |  | **Sometimes** |  | **Often** |  |
| Local Community League Hall | □ |  | □ |  | □ |  |
| Local Parks & Playground Areas | □ |  | □ |  | □ |  |
| School Space (gym, etc.) | □ |  | □ |  | □ |  |
| City of Edmonton Pools and Leisure Centres or other recreation centres | □ |  | □ |  | □ |  |
| City of Edmonton Arenas and Sport Fields | □ |  | □ |  | □ |  |
| Large Parks and the River Valley Area | □ |  | □ |  | □ |  |
| Dog Off-Leash Parks | □ |  | □ |  | □ |  |
|  |  |  |  |  |  |  |
| Other: Please specify |  |  |  |  |  |  |
| locations and |  |  |  |  |  |  |
| how often |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Information Sharing**

1. **We share information about our programs and special events with our members. What benefits would encourage you to purchase a community league membership? *Please check your top three (3) choices.***
	* Information about Neighbourhood Watch initiatives in the community
	* Free weekly swim at a neighbourhood pool
	* Free skating and/or hockey at neighbourhood skating rinks
	* Free or discounted local community programming
	* Discounts on Community League Hall Rentals
	* Discount on memberships at City of Edmonton recreation facilities
	* Discounts/coupons on memberships at other recreation facilities (e.g. YMCA, etc.)
	* Discounts/coupons at local businesses
	* Discounts/coupons at larger centres like malls
	* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **What is the best way for the community league to share information with you? (Information could include important changes to your neighbourhood, community events, recreational programs, etc).**

***Please rank your top three (3) choices as 1, 2, and 3.***

* 1. Changeable Copy Sign Board in the community
	2. Newsletter/poster delivered in mail
	3. Newsletter/poster placed at local businesses
	4. Website
	5. E-mail and Electronic Newsletter/poster
	6. Free local papers (Metro, Vue, etc.)
	7. Regional Newspapers (Edmonton Journal, Edmonton Sun, etc)
	8. Local Schools (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	9. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Are there any other issues that you feel should be addressed but were not covered in this survey?**

**Thank you for completing this survey.**

**All replies will be treated confidentially.**