

Metro Parks Tacoma

Your input is an important part of Metro Parks Tacoma's ongoing effort to provide quality services that the citizens of Tacoma need and value. This survey will take only 10-15 minutes to complete. Thank you for your valuable input!

1. Please indicate how often you and members of your household have used each of the following major parks, recreation and sports facilities operated by Metro Parks Tacoma during the past 12 months by circling the appropriate number to the right of each facility.

Number of times your household used these facilities during the past 12 months:

Never 1-9 times 10-24 times 25-49 times 50+ times

- (01) Community Center (STAR, Norpoint, Peoples Center or Portland Avenue)1.....2.....3.....4.....5
(02) Tacoma Nature Center.....1.....2.....3.....4.....5
(03) Kandle or Stewart Heights Pools.....1.....2.....3.....4.....5
(04) Swan Creek Park1.....2.....3.....4.....5
(05) SERA, Peck, or Heidelberg Sports Complex1.....2.....3.....4.....5
(06) Point Defiance Park or Facility
(Zoo, Marina or Fort Nisqually)1.....2.....3.....4.....5
(07) Northwest Trek Wildlife Park1.....2.....3.....4.....5
(08) Ruston Way or Waterfront Parks (Dash Pt, Theas)1.....2.....3.....4.....5
(09) Meadow Park Golf Course.....1.....2.....3.....4.....5
(10) WW Seymour Botanical Conservatory
in Wright Park.....1.....2.....3.....4.....5
(11) Other community/neighborhood parks.....1.....2.....3.....4.....5
(12) Other natural areas/hiking trails1.....2.....3.....4.....5

2. How would you rate the overall quality of Metro Parks Tacoma facilities that you and members of your household have visited over the past 12 months?

____(1) Excellent ____ (3) Fair ____ (5) Have not visited facilities
____(2) Good ____ (4) Poor

3. How would you rate the overall quality of Metro Parks Tacoma programs that you and members of your household have participated in over the past 12 months?

____(1) Excellent ____ (3) Fair ____ (5) Have not participated in
____(2) Good ____ (4) Poor programs

4. From the following list, please check the **THREE** primary reasons why you or other members of your household have used Metro Parks Tacoma programs/facilities.

____ (01) Quality of instruction ____ (06) Friends participate
____ (02) Location of facility ____ (07) Facilities are accessible
____ (03) Quality of facility ____ (08) Dates offered
____ (04) Quality of program ____ (09) Affordable fees
____ (05) Convenient times offered

5. From the following list, please check ALL the organizations that you and members of your household have used for recreation, education, fitness, and arts activities instead of Metro Parks Tacoma during the last 12 months.

- | | |
|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> (01) YMCA | <input type="checkbox"/> (11) Private pre-school providers |
| <input type="checkbox"/> (02) LA or 24 Hour Fitness | <input type="checkbox"/> (12) Local community college or schools |
| <input type="checkbox"/> (03) Sport, Cross-fit or Weight Trng.Gym | <input type="checkbox"/> (13) Come Back Sports |
| <input type="checkbox"/> (04) Churches | <input type="checkbox"/> (14) Art or History Museums |
| <input type="checkbox"/> (05) Private martial arts studios | <input type="checkbox"/> (15) Golf Course |
| <input type="checkbox"/> (06) Elite Sport or Swim club teams | <input type="checkbox"/> (16) Libraries |
| <input type="checkbox"/> (07) Other municipal recreation providers
(Pierce County, University Place, etc) | <input type="checkbox"/> (17) Foss Waterway Seaport |
| <input type="checkbox"/> (08) Other instructional art studios/providers
(Dance Studios, Theatres) | <input type="checkbox"/> (18) Gender Specific Gym |
| <input type="checkbox"/> (09) School-sponsored programs | <input type="checkbox"/> (19) Private yoga studio |
| <input type="checkbox"/> (10) Boys and Girls Club | <input type="checkbox"/> (20) County, State or other Parks |

6. From the following list, please check ALL the ways that you learn about Metro Parks Tacoma programs and activities.

- | | |
|------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> (01) Activity Brochure (Go-Guide) | <input type="checkbox"/> (11) Community meeting |
| <input type="checkbox"/> (02) District Sponsored Web sites | <input type="checkbox"/> (12) School fliers sent home |
| <input type="checkbox"/> (03) Metro Parks Today e-newsletter | <input type="checkbox"/> (13) Tacoma Weekly Newspaper |
| <input type="checkbox"/> (04) Fliers or Posters in community | <input type="checkbox"/> (14) Contact with Metro Parks staff |
| <input type="checkbox"/> (05) School Newsletters | <input type="checkbox"/> (15) Community Blog (Exit 133, Tacoma Runner) |
| <input type="checkbox"/> (06) Tacoma News Tribune | <input type="checkbox"/> (16) Bulletin Boards |
| <input type="checkbox"/> (07) Metro Parks social media | <input type="checkbox"/> (17) Member Newsletters (Trek Tracks, etc.) |
| <input type="checkbox"/> (08) Social media from family & friends | <input type="checkbox"/> (18) Word of Mouth/Friends |
| <input type="checkbox"/> (09) Post Cards/Direct Mail | <input type="checkbox"/> (19) Other: _____ |
| <input type="checkbox"/> (10) Volunteering | |

7. Which FOUR of the communication tools listed in Question #6 do you currently use the most?
[Using the numbers in Question #6 above, please write in the numbers below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

- 8 Please indicate how well you and members of your households needs are being met for **ADULTS AGES 18 AND OLDER** and **CHILDREN UNDER AGE 18** for each type of **Program or Activity** listed below by circling the appropriate response to the right of each program/activity. Note: If you do not have a need please circle “no need” for each age group.

Type of Programs or Activity		How Well Are Your Needs Being Met for Adults <u>AGES 18 AND OLDER</u> ?				How Well Are Your Needs Being Met for Children <u>UNDER AGE 18</u> ?			
		Fully Met	Partly Met	Not Met	No Need	Fully Met	Partly Met	Not Met	No Need
01.	Science/Environmental Ed.	7	6	5	4	3	2	1	0
02.	Cooking Classes	7	6	5	4	3	2	1	0
03.	Community Special Events	7	6	5	4	3	2	1	0
04.	Dance Classes or Drop In Dance Socials	7	6	5	4	3	2	1	0
05.	Fine arts, performing arts or music instruction	7	6	5	4	3	2	1	0
06.	Fitness programs (aerobics, Pilates, yoga, etc)	7	6	5	4	3	2	1	0
07.	“Green living” educational programs (solar energy, etc)	7	6	5	4	3	2	1	0
08.	Outdoor adventure trips/classes	7	6	5	4	3	2	1	0
09.	Group trips/social clubs	7	6	5	4	3	2	1	0
10.	Health/wellness information or personal training	7	6	5	4	3	2	1	0
11.	Historic re-enactment activities	7	6	5	4	3	2	1	0
12.	Sport lessons/camps	7	6	5	4	3	2	1	0
13.	Non-traditional team sports activities (lacrosse, rugby, other)	7	6	5	4	3	2	1	0
14.	Pet classes/ experiences	7	6	5	4	3	2	1	0
15.	Preschool or homeschool enrichment program	7	6	5	4	3	2	1	0
16.	Programs for persons with disabilities	7	6	5	4	3	2	1	0
17.	Runs (5k, marathon/ etc.)	7	6	5	4	3	2	1	0
18.	Skateboarding lessons	7	6	5	4	3	2	1	0
19.	Sports leagues for team sports	7	6	5	4	3	2	1	0
20.	Summer Camps	7	6	5	4	3	2	1	0
21.	Swimming lessons or exercise	7	6	5	4	3	2	1	0
22.	Volunteerism	7	6	5	4	3	2	1	0
23.	Water-based activities (scuba, paddleboard, kayaking)	7	6	5	4	3	2	1	0
24.	Youth after school or other drop in programs	7	6	5	4	3	2	1	0

9. Which **TWO** programs in question #8 are **MOST IMPORTANT** to the members of your household in the following age groups? [For each age group, write-in the numbers of the programs from question #8 that are your 1st and 2nd choices or circle NONE if there is no one in your household in that age group.]

Members of household . . .

Under age 18	1st: _____	2nd: _____	NONE
Ages 18 to 49	1st: _____	2nd: _____	NONE
Ages 50 and over	1st: _____	2nd: _____	NONE

10. Please indicate if YOU or any member of your HOUSEHOLD has a need for the parks and recreational facilities listed below by circling YES or NO next to the park/facility.

If YES, please rate ALL the following parks and recreation FACILITIES of this type in Tacoma on a scale of 4 to 1, where 4 means “Fully Meets Needs” and 1 means “Does Not Meet Needs” of your household.

Type of Facility	Do You NEED this type of Facility?		How Well Are Your Needs Being Met?			
	Yes	No	Fully Met	Mostly Met	Partly Met	Not Met
01. Soft surface walking/hiking trails	Yes	No	4	3	2	1
02. Hard surface trails	Yes	No	4	3	2	1
03. Community centers	Yes	No	4	3	2	1
04. Indoor fitness and exercise centers	Yes	No	4	3	2	1
05. Off-leash dog areas	Yes	No	4	3	2	1
06. Natural areas & wildlife habitats	Yes	No	4	3	2	1
07. Picnic areas and shelters	Yes	No	4	3	2	1
08. Baseball/ softball fields	Yes	No	4	3	2	1
09. Multi-use sport fields (soccer, football, lacrosse)	Yes	No	4	3	2	1
10. Outdoor basketball courts	Yes	No	4	3	2	1
11. Outdoor tennis courts	Yes	No	4	3	2	1
12. Spray plazas / Spraygrounds	Yes	No	4	3	2	1
13. Outdoor “play” swimming pools	Yes	No	4	3	2	1
14. Indoor swimming pools	Yes	No	4	3	2	1
15. Natural Lake swimming areas	Yes	No	4	3	2	1
16. Gyms/indoor sport courts	Yes	No	4	3	2	1
17. Playgrounds	Yes	No	4	3	2	1
18. Fishing piers/fishing facilities	Yes	No	4	3	2	1
19. Non- motorized water craft launches	Yes	No	4	3	2	1
20. Zip-lines or other challenge courses	Yes	No	4	3	2	1
21. Specialty gardens, displays and exhibits	Yes	No	4	3	2	1
22. Community gardens	Yes	No	4	3	2	1
23. Mountain bike trails	Yes	No	4	3	2	1
24. Skateboard parks	Yes	No	4	3	2	1
25. Zoos, wildlife parks or nature centers	Yes	No	4	3	2	1
26. Golf courses	Yes	No	4	3	2	1
27. Public restrooms in parks	Yes	No	4	3	2	1

11. Which FOUR of the facilities from the list in question #10 are MOST IMPORTANT to your household? [Using the letters and numbers in the left hand column of Question #10 above, please write in the letters or numbers below for your 1st, 2nd, 3rd, and 4th choices, or circle ‘NONE’.]

1st. _____ 2nd. _____ 3rd. _____ 4th. _____ NONE

12. From the following list, please check ALL the times that you and members of your household would be interested in Metro Parks Tacoma offering programs and activities.

Weekday (Monday-Friday):

- ____ (01) Weekday mornings (before 8am)
 ____ (02) Weekday mornings (8am-noon)
 ____ (03) Weekday afternoons (noon-3pm)
 ____ (04) Weekday afternoons (3pm-5pm)
 ____ (05) Weekday evenings (5pm-8pm)
 ____ (06) Weekday evenings (after 8pm)

Weekend (Saturday-Sunday):

- ____ (07) Weekend mornings (before 8am)
 ____ (08) Weekend mornings (8am-noon)
 ____ (09) Weekend afternoons (noon-3pm)
 ____ (10) Weekend afternoons (3pm-5pm)
 ____ (11) Weekend evenings (5pm-8pm)
 ____ (12) Weekend evenings (after 8pm)

13. Please circle the number that shows your level of interest for having Metro Parks Tacoma offer each of the following types of program formats.

	Very Interested	Somewhat Interested	Not Interested	Don't Know
(01) One day programs/clinics/workshops	1.....	2.....	3.....	9.....
(02) Multi-week programs/classes	1.....	2.....	3.....	9.....
(03) Drop in activities and usage	1.....	2.....	3.....	9.....
(04) Self-Guided/Independent usage	1.....	2.....	3.....	9.....

14. On a scale of 5 to 1, with 5 being “Very likely” and 1 being “Not Very Likely”, please circle the number to the right of each manner in which environmental programs or history/art programs could be offered that you would attend:

	Very Likely	Likely	Neutral	Not Likely	Not Very Likely
<u>Environmental Education:</u>					
(01) Traditional lecture style program offered indoors.....	5.....	4.....	3.....	2.....	1.....
(02) A participant-led discussion on a topic of interest	5.....	4.....	3.....	2.....	1.....
(03) A guided outdoor hike/nature experience	5.....	4.....	3.....	2.....	1.....
(04) A passive outdoor activity/viewing.....	5.....	4.....	3.....	2.....	1.....
(05) A program in which you make something to take home (e.g. rain barrel, compost bin, bird house)	5.....	4.....	3.....	2.....	1.....
(06) A community event to work with trained people to gather info about native animals & plants (i.e. BioBlitz)... ..	5.....	4.....	3.....	2.....	1.....
(07) A hands-on learning/demonstration (pruning, planting) ..	5.....	4.....	3.....	2.....	1.....
(08) A conservation/stewardship volunteer event.....	5.....	4.....	3.....	2.....	1.....

History or Art Programs:

(09) Traditional lecture style program	5.....	4.....	3.....	2.....	1.....
(10) A participant-led discussion on a topic of interest	5.....	4.....	3.....	2.....	1.....
(11) A guided tour with interpretation	5.....	4.....	3.....	2.....	1.....
(12) A gallery/museum exhibit viewing	5.....	4.....	3.....	2.....	1.....
(13) A re-enactment or hands-on program.....	5.....	4.....	3.....	2.....	1.....
(14) A community performance presented by others.....	5.....	4.....	3.....	2.....	1.....
(15) A self-guided experience through sculptures/art.....	5.....	4.....	3.....	2.....	1.....

15. Please CHECK ALL the reasons that prevent you or other members of your household from using parks, recreation and arts facilities or programs offered by Metro Parks Tacoma at all or more often.

- | | |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> (01) Facilities are not well maintained | <input type="checkbox"/> (11) Poor customer service by staff |
| <input type="checkbox"/> (02) Program or facility not offered | <input type="checkbox"/> (12) I do not know locations of facilities |
| <input type="checkbox"/> (03) Facilities lack the right equipment | <input type="checkbox"/> (13) Use services of other agencies |
| <input type="checkbox"/> (04) Security is insufficient | <input type="checkbox"/> (14) Fees are too high |
| <input type="checkbox"/> (05) Lack of quality programs | <input type="checkbox"/> (15) I do not know what is being offered |
| <input type="checkbox"/> (06) Too far from our residence | <input type="checkbox"/> (16) Facility operating hours not convenient |
| <input type="checkbox"/> (07) Class full/cancelled too often | <input type="checkbox"/> (17) Registration for programs is difficult |
| <input type="checkbox"/> (08) Program times are not convenient | <input type="checkbox"/> (18) Lack of parking by facilities and parks |
| <input type="checkbox"/> (09) Use facilities in other cities | <input type="checkbox"/> (19) Other: _____ |
| <input type="checkbox"/> (10) Not accessible for people with disabilities | |

16. For the following activities, what is the maximum time you would be willing to travel by car or bus to attend?

	Less than 10 minutes	10-20 minutes	20-30 minutes	More than 30 minutes	Not Sure
(01) Visit a community center, swimming pool or athletic complex	4	3	2	1	9
(02) Visit your closest neighborhood park.....	4	3	2	1	9
(03) Visit a large community park that offers an event or unique use experience	4	3	2	1	9
(04) Attend a regularly scheduled YOUTH activity	4	3	2	1	9
(05) Attend a regularly scheduled ADULT activity	4	3	2	1	9
(06) Attend a special event or participate in a family day outing	4	3	2	1	9

17. How long are you willing to walk to visit a park or program location?

- ☐ (01) Less than 10 minutes
- ☐ (02) 10-20 minutes
- ☐ (03) 20-30 minutes
- ☐ (04) 30 or more minutes
- ☐ (05) Not sure

18. From the list below, please select the THREE Metro Parks Tacoma programs that your household would MOST SUPPORT being funded with TAX DOLLARS. [Please write in the numbers in the spaces below for your 1st, 2nd, and 3rd choices OR circle none.]

_____	_____	_____	
1 st Support	2 nd Support	3 rd Support	None
(01) Youth sports programs		(07) Community special events and festivals	
(02) Adult sports programs		(08) Programs for low income residents	
(03) Youth camps		(09) Programs for special populations/disabled	
(04) Adult classes (exercise, arts, dance, etc.)		(10) Private rentals or permitted uses	
(05) Youth classes (swimming, arts, dance, etc.)		(11) General operations of facilities	
(06) Senior Adults classes			

Demographics:

19. Counting yourself, how many people in your household are?

Under 5 years _____	15 - 19 years _____	35 - 44 years _____	65 - 74 years _____
5 - 9 years _____	20 - 24 years _____	45 - 54 years _____	75+ years _____
10 - 14 years _____	25 - 34 years _____	55 - 64 years _____	

20. What is your age? _____

21. Your gender: _____ (1) Male _____ (2) Female

22. What is your household income? [Check one.]

_____ (1) Under \$25,000	_____ (4) \$75,000-\$99,999
_____ (2) \$25,000-\$49,999	_____ (5) \$100,000-\$149,999
_____ (3) \$50,000-\$74,999	_____ (6) \$150,000 and over

23. How many years have you lived in Tacoma? _____ Years

24. Are you or any member of your household of Hispanic/Latino ethnicity?

_____ (1) Yes _____ (2) No

25. Which of the following best describes your race/ethnicity? (Check all that apply)

_____ (1) White/Caucasian	_____ (5) African American/Black
_____ (2) Asian	_____ (6) Native American
_____ (3) Pacific Islander	_____ (7) Other: _____

26. Are you or any member of your household currently in the military or a veteran?

_____ (1) Yes _____ (2) No

This concludes the survey. Thank you for your time.

**Please Return Your Completed Survey in the Enclosed Return-Reply Envelope Addressed to:
ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061**

Your responses will remain completely confidential
The address information printed to the right will
ONLY be used to help identify geographic area interests.