

## Demographic Questionnaire

For each question: please tick the box/ circle which best represents your opinion.

**What is your age?**

\_\_\_\_\_ years

**What is your gender?**

☐ male

☐ female

**Participant ID:**

**Do you have to do hand exercises for health reasons?**

yes ☐

no ☐

**(Only if you answered the previous question with yes) How often do you these hand exercises?**

Every day ☐

4-6 times a week ☐

1-3 times a week ☐

other: \_\_\_\_\_

**How much fun do you had while doing the hand exercise?**

I had no fun at all.

☐ ☐ ☐ ☐ ☐

I had really much fun.

**Would you do the exercise frequently? If yes, how often?**

yes ☐

no ☐

only if my doctor recommends me to do such exercises ☐

(if yes):

1-2 times a week ☐

3-4 times a week ☐

5-7 times a week ☐

less frequently ☐

**How did you feel while doing the exercise? Name three feelings.**

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**Do you like the game ?**

It is the worst game  
ever.

☐ ☐ ☐ ☐ ☐

It is the best game I've  
ever played.

**Would you play the game in your free time, even you don't have to do hand exercises?**

yes ☐

no ☐

maybe ☐