



Seattle City Parks Visitor Survey


The following questionnaire asks about your experience in the Seattle City Parks. Your answers will help UW researchers understand who uses the park in order to plan for future use.

Participation in this survey is entirely voluntary. Your responses are anonymous. Please contact Spencer Wood at (206) 616-8730 or spwood@uw.edu with any questions about the study or this survey. Thank you for participating.

1. How many people are in your party today, including yourself? ____ adults (18+), ____ children
2. How did your party travel to the park today (check all that apply)
____ car ____ bus/transit ____ walk or run ____ bike ____ other: _____
3. Do you live within a 10-minute walk of this park? yes | no
4. If you drove, did you park in a lot designated for this park? yes | no
5. How long did you spend in the park today? ____ minutes, ____ hours
6. How many times have you visited this park in the last 12 months (including today)? _____ times
7. What did you like most about your visit to this park today?

8. What did you like least about your visit to this park today?

9. How important are each of the following reasons for visiting this area today? (circle one)

	not important			extremely important	
exercise and fitness	1	2	3	4	5
enjoy nature and be outdoors	1	2	3	4	5
recreation and play	1	2	3	4	5
socialize with family and friends	1	2	3	4	5
relax or unwind	1	2	3	4	5
it's close to home	1	2	3	4	5
safety	1	2	3	4	5

24. Do you share content on the following social media platforms (circle all that apply)?

Facebook | Twitter | Flickr | Instagram | Weibo | Strava | Snapchat | none | other

25. Do you plan to share content about your trip today on these social media (circle all that apply)?

Facebook | Twitter | Flickr | Instagram | Weibo | Strava | Snapchat | none | other

PLEASE FLIP OVER

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10. Please check all activities you participated in while in this park today (check all that apply).

- | | | |
|---|---|--|
| <input type="checkbox"/> walking or hiking | <input type="checkbox"/> children's playground | <input type="checkbox"/> commuting/passing through |
| <input type="checkbox"/> running or jogging | <input type="checkbox"/> p-patch or gardening | <input type="checkbox"/> beach going |
| <input type="checkbox"/> bicycling | <input type="checkbox"/> picnicking or barbecuing | <input type="checkbox"/> swimming |
| <input type="checkbox"/> playing sports | <input type="checkbox"/> organized event | <input type="checkbox"/> fishing |
| <input type="checkbox"/> lawn games | <input type="checkbox"/> enjoying nature | <input type="checkbox"/> boating |
| <input type="checkbox"/> dog walking/exercising | <input type="checkbox"/> photography | <input type="checkbox"/> other _____ |

12. Was your main activity you participated in today indoors or outdoors? indoors | outdoors

13. Please check the park infrastructure you used while in this park today (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> trails | <input type="checkbox"/> restrooms | <input type="checkbox"/> picnic or barbecue area |
| <input type="checkbox"/> baseball field | <input type="checkbox"/> community center | <input type="checkbox"/> off leash dog area |
| <input type="checkbox"/> sports field | <input type="checkbox"/> interpretive signs | <input type="checkbox"/> skate park |
| <input type="checkbox"/> basketball court | <input type="checkbox"/> fitness equipment | <input type="checkbox"/> golf green |
| <input type="checkbox"/> tennis court | <input type="checkbox"/> playground | <input type="checkbox"/> other _____ |

14. From the lists above, circle the primary activity & infrastructure you used during your visit?

15. What year were you born? _____

16. If you live in the United States, what is your home zip code? _____

17. If you live outside the US, what is your home country & postal code? _____

18. Are you Spanish, Hispanic, or Latino? yes | no

19. What is your race (circle all that apply)?

American Indian/Alaska Native Asian/Asian-American Black/African American
White/Caucasian Native Hawaiian/Pacific Islander

20. What is the primary language spoken in your home?

Amharic | Chinese | English | Spanish | Tagalog | Vietnamese | Other: _____

21. What is the highest level of formal education that you have completed?

less than high school | high school/GED | two-year college | four-year college | graduate school

22. Which of the following categories best describes your total annual household income last year?

less than \$25,000 | \$25,000-49,999 | \$50,000-99,999 | \$100,000-149,999 | \$150,000 or more

23. How many people are supported by the total household income? _____

Internal Use Only: Site Name _____ Date _____ Time _____ Initials _____
Gen _____ Party ID _____ Notes: _____