## **Demographical Questions (Required)**

1. What is your pa	articipan	t ID?			-			
2. <b>What is your g</b> o								
Female								
Male								
Prefer no	ot to sav							
Other:								
3. <b>What is your a</b> g	_	?						
_	vai.							
18 - 24								
25 - 34								
35 - 44								
45 - 54								
55 - 64								
4. If you have any headset?	optical	correct	ions, di	d you n	eed to r	emove	them wh	nen using the VR
Mark only one o	val.							
Yes								
No								
5. Have you taker redirected walk		any prid	or virtua	al reality	/ experi	ments c	or experi	ences that used
Mark only one o	val.							
Yes								
O No								
6. <b>How much pre</b> Mark only one o		perienc	e have	you had	l with vi	rtual re	ality?	
	0	1	2	3	4	5	6	
No experience								Very much experience

## **Qualitative Feedback (Optional)**

7.	Did you notice any bugs or glitches throughout	ıt your playsessio
3.	Was the experience enjoyable?	
).	How did the redirection techniques feel to you	?
•	Then all the real content to minimum to you	•
Э.	Did you have any problems throughout the ex	periment?
	Is there any way the experience could be impr	oved?
	Any additional comments?	
<u>.</u>		
2.		
2.		
2.		