

The Fairfax County Park Authority would like your input to help determine parks and recreation priorities for our community. **This survey will take 10-15 minutes to complete.** When you are finished, please return your survey in the enclosed postage-paid, return-reply envelope. **We greatly appreciate your time.**

1. Counting yourself, how many people your household are?

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

2. Have you or members of your household visited any of the parks operated by the Fairfax County Park Authority over the past 12 months?

_____ (1) Yes [please answer question #3] _____ (2) No [please go to question #4]

3. Overall, how would you rate the physical condition of ALL the Fairfax County Park Authority parks, trails and recreation facilities you have visited?

_____ (1) Excellent _____ (3) Fair
 _____ (2) Good _____ (4) Poor

4. From the following list, on a scale of 5 to 1 where 5 means “Strongly Agree” and 1 means “Strongly Disagree”, please indicate how much you agree or disagree with the following statements:

| I think it is important for the Park Authority to... | | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
|--|---|----------------|-------|---------|----------|-------------------|
| A. | Provide opportunities to improve physical health and fitness | 5 | 4 | 3 | 2 | 1 |
| B. | Provide opportunities for people to make social connections and strengthen the social fabric of the community | 5 | 4 | 3 | 2 | 1 |
| C. | Preserve open space and the environment | 5 | 4 | 3 | 2 | 1 |
| D. | Conserve and educate people about natural resources | 5 | 4 | 3 | 2 | 1 |
| E. | Conserve and educate people about historic sites | 5 | 4 | 3 | 2 | 1 |
| F. | Improve mental health and reduce stress | 5 | 4 | 3 | 2 | 1 |
| G. | Make Fairfax County a more desirable place to live | 5 | 4 | 3 | 2 | 1 |
| H. | Provide recreational facilities/programs for children and teens | 5 | 4 | 3 | 2 | 1 |
| I. | Provide recreational facilities/programs for adults (18-49 years old) | 5 | 4 | 3 | 2 | 1 |
| J. | Provide recreational facilities/programs for adults (50 and older) | 5 | 4 | 3 | 2 | 1 |
| K. | Provide recreational opportunities for people who might otherwise be unable to participate (i.e. lower income households, people with disabilities) | 5 | 4 | 3 | 2 | 1 |

5. Which THREE of the statements from the list in Question #4 are MOST IMPORTANT for the Fairfax County Park Authority to do for you and members of your household? [Using the letters in Question #4 above, please write in the letters below for your 1st, 2nd, and 3rd choices, or circle ‘NONE.’]

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

6. Which THREE of the statements from the list in Question #4 are MOST IMPORTANT for the Fairfax County Park Authority to do for the future of Fairfax County? [Using the letters in Question #4 above, please write in the letters below for your 1st, 2nd, and 3rd choices, or circle ‘NONE.’]

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

7. Please indicate if ***YOU or any member of your HOUSEHOLD*** has a need for each type of **Park, Play Areas, Gardens, Trails, Equestrian, Nature or Historic** park or facility listed below by circling YES or NO to the right of each type of park or facility.

If YES, please answer the questions to the right of the park or facility regarding “How Well are Your Needs Being Met?” and “How Many Times Did You Use this Type of Park or Facility During the Past 12 Months?” If NO, please go to the next type of park or facility.

| Type of Park or Facility | | Do You Have a Need for this Facility or Activity? | | If Yes, How Well are Your Needs Being Met? (Circle ONE Response) | | | | If Yes, How Many Times Did You Use this Type of Park or Facility During the Past 12 Months? (Circle ONE Response) | | | |
|---|----------------------------------|---|----|---|------------|------------|---------|--|------------|-------------|------------------|
| | | | | Fully Met | Mostly Met | Partly Met | Not Met | None | 1-10 times | 11-25 times | 26 or more times |
| Parks, Play Areas and Gardens | | | | | | | | | | | |
| A. | Small community parks | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| B. | Large regional parks | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| C. | Lakefront parks and marinas | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| D. | Smaller neighborhood playgrounds | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| E. | Larger destination playgrounds | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| F. | Open play areas | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| G. | Picnic shelters/areas | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| H. | Amusements (carousels, trains) | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| I. | Off-leash dog parks | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| J. | Public gardens | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| K. | Community garden plots | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| Trails, Equestrian, Nature, and Historic Areas | | | | | | | | | | | |
| L. | Paved walking/biking trails | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| M. | Unpaved walking/biking trails | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| N. | Equestrian trails | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| O. | Equestrian facilities | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| P. | Historic sites and museums | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| Q. | Nature centers | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |

8. Which **FOUR** of the parks or facilities from the list in Question #7 are **MOST IMPORANT** to your household? [Using the letters in Question #7 above, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

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

9. Please indicate if **YOU or any member of your HOUSEHOLD** has a need for each type of **Outdoor or Indoor facility** listed below by circling YES or NO to the right of each type of facility.

If YES, please answer the questions to the right of the facility regarding “How Well are Your Needs Being Met?” and “How Many Times Did You Use this Type of Park or Facility During the Past 12 Months?” If NO, please go to the next type of facility.

| Type of Outdoor or Indoor Facility | | Do You Have a Need for this Facility or Activity? | | If Yes, How Well are Your Needs Being Met? | | | | If Yes, How Many Times Did You Use this Type of Park or Facility During the Past 12 Months? | | | |
|------------------------------------|--|---|----|--|------------|------------|---------|---|------------|-------------|------------------|
| | | | | Fully Met | Mostly Met | Partly Met | Not Met | None | 1-10 times | 11-25 times | 26 or more times |
| Outdoor Facilities | | | | | | | | | | | |
| A. | Baseball fields (90ft bases) | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| B. | Baseball fields (60ft bases) | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| C. | Softball fields | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| D. | Soccer/football/lacrosse/field hockey/rugby fields | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| E. | Cricket fields | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| F. | Tennis courts | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| G. | Basketball/multi-use courts | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| H. | Golf courses & practice areas | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| I. | Skateboard facilities | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| J. | Water parks & spraygrounds | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| Indoor Facilities | | | | | | | | | | | |
| K. | Gyms (basketball, volleyball, etc.) | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| L. | Swimming pools | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| M. | Exercise & fitness facilities | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| N. | Ice rink | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |
| O. | Indoor fields | Yes | No | 4 | 3 | 2 | 1 | 0 | 1 | 2 | 3 |

10. Which **FOUR** of the outdoor or indoor facilities from the list in Question #9 are **MOST IMPORANT** to your household? [Using the letters in Question #9 above, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

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

11. Please indicate if **YOU or any member of your HOUSEHOLD** has a need for each type of Program or Activity listed below by circling YES or NO to the right of each type of program or activity.

If YES, please answer the questions to the right regarding “How Well are Your Needs Being Met?” and “Have You Used this Program or Activity During the Past 12 Months”. If NO, please go to the next type of program or activity.

| Type of Program or Activity | | Do You Have a Need for this Program? | | If Yes, How Well are Your Needs Being Met? | | | | If Yes, Have You Used this Program or Activity During the Past 12 Months? | |
|-----------------------------|---------------------------------------|--------------------------------------|----|--|------------|------------|---------|---|----|
| | | | | Fully Met | Mostly Met | Partly Met | Not Met | Yes | No |
| A. | Boating, fishing, camping | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| B. | Summer day camps | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| C. | Day trips and tours | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| D. | Special events, concerts | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| E. | Gardening programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| F. | Volunteering | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| G. | Biking, hiking, walking | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| H. | Birthday parties | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| I. | Programs for families | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| J. | Programs for people with disabilities | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| K. | Swim-Learn to swim lessons | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| L. | Swim-Advanced stroke lessons | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| M. | Water exercise | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| N. | Equestrian/horseback riding | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| O. | Exercise/fitness | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| P. | Art programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| Q. | Golf instruction | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| R. | History programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| S. | Ice skating/hockey | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| T. | Martial arts/self defense | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| U. | Nature/environmental programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| V. | Performing arts (dance, drama) | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| W. | Pet programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| X. | Sports instruction | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| Y. | Tennis lessons | Yes | No | 4 | 3 | 2 | 1 | Yes | No |
| 1. | Science/technology programs | Yes | No | 4 | 3 | 2 | 1 | Yes | No |

12. Which TWO programs in Question #11 are MOST IMPORTANT to the members of your household in the following age groups? [For each age group, write-in the letter or number of the programs from Question #11 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 | 1 st . _____ | 2 nd . _____ | NONE |
| Ages 18 to 49 | 1 st . _____ | 2 nd . _____ | NONE |
| Ages 50 and over | 1 st . _____ | 2 nd . _____ | NONE |

13. Following are actions that the Fairfax County Park Authority could take to improve the Parks and Recreation system. Please indicate whether you would be very supportive, somewhat supportive, not sure, or not supportive of each action by circling the number next to the action.

| | | Very Supportive | Somewhat Supportive | Not Sure | Not Supportive |
|--|---|--------------------|------------------------|-------------|-------------------|
| <u>How supportive are you of having the County:</u> | | | | | |
| (A) | Purchase land to preserve open space and natural areas..... | 4 | 3 | 2 | 1 |
| (B) | Purchase historic sites for preservation..... | 4 | 3 | 2 | 1 |
| (C) | Purchase land for passive recreational uses (such as trails, picnic areas, and shelters) | 4 | 3 | 2 | 1 |
| (D) | Purchase land for developing athletic fields & recreational facilities..... | 4 | 3 | 2 | 1 |
| (E) | Upgrade/renovate existing park buildings and facilities | 4 | 3 | 2 | 1 |
| (F) | Expand/renovate program and class spaces | 4 | 3 | 2 | 1 |
| (G) | Upgrade/renovate athletic fields,including lighting | 4 | 3 | 2 | 1 |
| (H) | Upgrade/renovate existing golf facilities | 4 | 3 | 2 | 1 |
| (I) | Expand/renovate walking/biking trails and connect existing trails..... | 4 | 3 | 2 | 1 |
| (J) | Upgrade/renovate fitness facilities at existing recreation centers | 4 | 3 | 2 | 1 |
| (K) | Upgrade/renovate aquatic facilities at existing recreation centers | 4 | 3 | 2 | 1 |
| (L) | Restore/maintain natural areas..... | 4 | 3 | 2 | 1 |
| (M) | Restore/maintain historic areas | 4 | 3 | 2 | 1 |
| (N) | Develop new athletic fields..... | 4 | 3 | 2 | 1 |
| (O) | Develop small community parks with limited recreational facilities that serve those nearby..... | 4 | 3 | 2 | 1 |
| (P) | Develop large parks with a greater variety of recreational facilities that serve a wider area..... | 4 | 3 | 2 | 1 |
| (Q) | Ensure provision of parks in redeveloping growth areas of the County..... | 4 | 3 | 2 | 1 |
| (R) | Other:_____ | 4 | 3 | 2 | 1 |

14. Which FOUR of these items would you be most willing to fund with your County tax dollars? [Write in the letters below using the letters from the list in Question #13 above or circle 'NONE'.]

| | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|------|
| <u>1st Most</u> | <u>2nd Most</u> | <u>3rd Most</u> | <u>4th Most</u> | NONE |
| Willing | Willing | Willing | Willing | |

15. If an additional \$100 were available for Parks and Recreation facilities in Fairfax County, how would you allocate the funds among the categories listed below? [Please be sure that your allocation adds up to \$100.]

- \$_____ Acquire new parkland and open space
- \$_____ Repair/maintain existing parks and infrastructure
- \$_____ Conserve and maintain natural and historic resources
- \$_____ Upgrade/expand existing park facilities
- \$_____ Develop new recreation and parks facilities
- \$ 100 TOTAL**

16. On a scale of 10 to 1, with 10 being “Excellent” and 1 being “Poor”, please circle the number that best represents how you would rate your satisfaction with the Fairfax County park system overall?

Excellent

Neutral

Poor

10 09 08 07 06 05 04 03 02 01

17. How important are high quality parks, trails, recreation facilities and services to the quality of life in Fairfax County?

- ____ (1) Extremely important
- ____ (2) Very important
- ____ (3) Somewhat important
- ____ (4) Not at all important

DEMOGRAPHICS

18. What is your age? _____

19. How many years have you lived in Fairfax County? _____ years
[Note: Please do not answer if you do not live in Fairfax County.]

20. Your Gender: ____ (1) Male ____ (2) Female

21. Which of the following best describes your home?

- ____ (1) Single-family house
- ____ (2) Townhouse/duplex
- ____ (3) Apartment
- ____ (4) Condominium
- ____ (5) Other: _____

22. Are you or other members of your household of Hispanic, Latino, or Spanish ancestry?
____ (1) Yes ____ (2) No

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

- ____ (1) African American/Black
- ____ (2) Asian/Pacific Islander
- ____ (3) White/Caucasian
- ____ (4) Other: _____

24. What is your household income?

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

25. **If you would be willing to attend a focus group or public meeting to discuss park and recreation related issues, please provide a telephone number and/or email address so that we may contact you.**

Phone Number: (____) ____ - _____

Email Address: _____

26. **Please share any additional park needs, comments or concerns that you or your household may have:**

This concludes the survey. Thank you for your time!

Your responses will remain Completely Confidential.
The address information to the right will ONLY be used
to help identify areas with special interests.