

The City of Fairfax would like your input to help determine priorities for parks, recreation, trails, open space, cultural arts, and community events for the City of Fairfax. The survey results will be used in the Strategic Master Plan for Parks, Recreation, Open Space, Trails, Cultural Arts and Community Events, along with the results from several public workshops, to determine our residents' needs and priorities. This survey will take approximately 10 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. Have you or any member of your household visited any of the parks and/or recreation facilities in the City of Fairfax and/or George Mason University recreation facilities during the past 12 months?

- (Yes (please answer Questions 1a and 1b)
- No (please skip to Question 4)

1a. Approximately how often did you or members of your household visit those facilities in the City of Fairfax during the past year?

- 1 to 5 visits
- 6 to 10 visits
- 11-19 visits
- 20 or more visits
- Don't know

1b. Overall, how would you rate the physical condition of the facilities you have visited?

- Excellent
- Good
- Fair
- Poor

2. From the following list, please check ALL of the parks and recreation facilities that you or members of your household have visited in the past 12 months.

City of Fairfax Parks and Facilities

- (01) Ashby Pond Conservatory Site
- (02) Blenheim Interpretive Center
- (03) Cobbdale Park
- (04) Country Club Hills Commons
- (05) Dale Lestina Park
- (06) Daniels Run Park
- (07) Draper Drive Park
- (08) Fairchester Woods Park
- (09) Green Acres Park
- (10) Green Acres Center
- (11) Jester Property- (Undeveloped)
- (12) Kitty Pozer Garden
- (13) Kutner Park
- (14) Old Town Hall
- (15) Pat Rodio Park
- (16) Providence Park
- (17) Ranger Road Park
- (18) Ratcliffe Park
- (19) Rebel Run Property (undeveloped)
- (20) Sager Trail
- (21) School Street Park
- (22) Shiloh Street Park
- (23) Stacy C. Sherwood Community Center
- (24) Stafford East Park (undeveloped)

- (25) Stafford Drive Park
- (26) Ted Grefe Park (undeveloped)
- (27) Thaiss Memorial Park
- (28) University Park
- (29) Van Dyck Park
- (30) Westmore Park
- (31) Westmore School Site
- (32) Willcoxon Park Trail
- (33) Willow Wood Open Space (undeveloped)

Schools Outdoor Athletic Fields

- (34) Daniels Run Elementary
- (35) Fairfax High School
- (36) Providence Elementary
- (37) Sidney Lanier Elementary

Other Area Parks & Facilities

- (38) Northern Virginia Regional Parks
- (39) Cross County Trail
- (40) Gateway Regional Park
- (41) Civic Association Parks/Pools
- (42) Fairfax County Parks
- (43) Oak Marr RECenter & Park
- (44) GMU Recreation & Aquatic Center (RAC)
- (45) GMU Athletic & Fitness Center (AFC)
- (46) GMU Recreational Fields
- (47) GMU Trails and Paths

3. Which three of the facilities from the list in Question #2 did you visit the most in the last 12 months [Please write in the numbers below for your 1st, 2nd, and 3rd most visited facilities using the numbers in Question #2 above or circle NONE.] 1st most visited: _____ 2nd: _____ 3rd: _____ NONE

4. Have you or members of your household participated in any recreational programs offered by the City of Fairfax over the past 12 months?

Yes (please answer Question 4a) No (please skip to Question 5)

4a. How would you rate the quality of the programs in which you and members of your household participated?

Excellent Good Fair Poor

5. Have you or members of your household participated in any Special Events or Cultural Arts activities offered by the City of Fairfax over the past 12 months?

Yes (please answer Question 5a and 5b) No (please skip to Question 6)

5a. If you answered "Yes" to question 5, please indicate which events you or your family members attended.

- | | |
|--|---|
| <input type="checkbox"/> Independence Day Celebration | <input type="checkbox"/> Fairfax Choral Society |
| <input type="checkbox"/> Independence Day Fireworks | <input type="checkbox"/> City of Fairfax Irish Festival |
| <input type="checkbox"/> Festival of Lights & Carols | <input type="checkbox"/> Fairfax Art League Exhibitions |
| <input type="checkbox"/> Spotlight on the Arts | <input type="checkbox"/> Fairfax Symphony Orchestra |
| <input type="checkbox"/> Egg Hunt | <input type="checkbox"/> Friday Morning Music Club |
| <input type="checkbox"/> Father Daughter Dance | <input type="checkbox"/> Jazz for Justice |
| <input type="checkbox"/> Fall for the Book | <input type="checkbox"/> Mason Players |
| <input type="checkbox"/> City of Fairfax Band Concerts | <input type="checkbox"/> Music at Mason |
| <input type="checkbox"/> Annual Fall Festival | <input type="checkbox"/> Old Town Plaza Gallery |
| <input type="checkbox"/> Acting for Young People | <input type="checkbox"/> Old Town Plaza Summer Series |
| <input type="checkbox"/> Bonita Lestina Performance Series | <input type="checkbox"/> Potomac Arts Academy |
| <input type="checkbox"/> Childrens' Performance Series | <input type="checkbox"/> Rotary Gallery at The Sherwood |
| <input type="checkbox"/> Center for the Performing Arts at Mason | <input type="checkbox"/> Summer Concert Series at Veterans Amphitheater |
| <input type="checkbox"/> City of Fairfax Antique Car Show | <input type="checkbox"/> Virginia Opera |
| | <input type="checkbox"/> Patriot Theater |

5b. How would you rate the quality of the events in which you and members of your household participated?

Excellent Good Fair Poor

6. The following are actions that the City of Fairfax could take to improve the parks and recreation services in the City. Please indicate whether you would be very supportive, somewhat supportive, or not supportive of each action by circling the number next to the action.

	Very Supportive	Somewhat Supportive	Not Supportive	Not Sure
(A) Purchase land to preserve open space, natural, and historic areas.....	4	3	2	1
(B) Purchase land for developing athletic fields & recreational facilities.....	4	3	2	1
(C) Purchase land to connect existing parks.....	4	3	2	1
(D) Upgrade older parks and recreation facilities.....	4	3	2	1
(E) Upgrade existing youth/adult athletic fields, including new lighting.....	4	3	2	1
(F) Develop new athletic fields.....	4	3	2	1
(G) Develop new recreational trails and connect existing trails.....	4	3	2	1
(H) Develop new commuter biking trails.....	4	3	2	1
(I) Restore stream corridors.....	4	3	2	1
(J) Develop new nature, history and horticulture facilities.....	4	3	2	1
(K) Develop new skate park.....	4	3	2	1
(L) Develop new dog park.....	4	3	2	1
(M) Develop new indoor recreation and fitness facilities.....	4	3	2	1
<u>(N) Develop an indoor swimming pool.....</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>
<u>(O) Develop an outdoor family aquatic center.....</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>
<u>(P) Add or improve restrooms in the parks.....</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>
(NQ) Develop new programs for teens.....	4	3	2	1
(OR) Improve the Green Acres Senior Center.....	4	3	2	1
(PS) Partner with GMU Recreation on outdoor fields.....	4	3	2	1
(QT) Other.....	4	3	2	1

7. Which THREE of the functions listed in Question #6 do you think should be most important for City of Fairfax to provide? [Please write in the letters below for your 1st, 2nd, and 3rd choices using the letters from the list in Question #6 above]

_____ 1st _____ 2nd _____ 3rd

8. From the following list, please check ALL the organizations that you and members of your household use — for parks and recreation programs and facilities in any location.

- | | |
|--|---|
| ___ (01) City of Fairfax Parks and Recreation | ___ (11) College or university |
| ___ (02) City of Fairfax Schools | ___ (12) Public & private golf courses |
| ___ (03) Fairfax County Park Authority | ___ (13) Homeowners/apartment complex |
| ___ (04) Northern Virginia Regional Park Authority | ___ (14) YMCA/YWCA |
| ___ (05) Private schools | ___ (15) Fairfax Police Youth Club (FPYC) |
| ___ (06) Private youth sports leagues | ___ (16) Fairfax Little League |
| ___ (07) Churches | ___ (17) None, do not use any organizations |
| ___ (08) Private clubs (tennis, health & fitness) | ___ (18) Other: _____ |
| ___ (09) Country Clubs | ___ (19) GMU Indoor Recreation Space |
| ___ (10) Neighboring/cities/counties/state parks | ___ (20) GMU Outdoor Recreation Space |

9. From the list in Question #8 which TWO organizations do you and your household USE THE MOST for recreation and parks programs and facilities? [Write in the numbers from the list in Question #8 for the TWO agencies you use most.]

_____ Organization Use Most

_____ Organization Used 2nd Most

10. Please indicate if you or any member of your household has a need for each of the parks and recreational facilities listed below by circling the number for how well your need is being met. Rank the responses from (0) which indicates you do not need the facility to (3) which indicates your need is completely being met.

	Type of Facility	How Well Are Your Needs Being Met by Facilities?			
		Do Not Need	Need is not met at all	Need is somewhat met	Need is completely met
A.	Small neighborhood parks	0	1	2	3
B.	Large community parks	0	1	2	3
C.	Rectangular fields for lacrosse, soccer, football, or field hockey	0	1	2	3
D.	Ice rink	0	1	2	3
E.	Baseball fields	0	1	2	3
F.	Softball fields	0	1	2	3
G.	Playgrounds	0	1	2	3
H.	Picnic shelters / picnic areas	0	1	2	3
I.	Non-paved walking and hiking trails	0	1	2	3
J.	Paved walking and biking trails	0	1	2	3
K.	Natural areas/nature parks	0	1	2	3
L.	Horticulture centers/ community gardens	0	1	2	3
M.	Off-leash dog parks	0	1	2	3
N.	Skateboarding / wheel park area	0	1	2	3
O.	Outdoor swimming pools/aquatic centers	0	1	2	3
P.	Tennis courts	0	1	2	3
Q.	Outdoor basketball courts	0	1	2	3
R.	Indoor gym (basketball/volleyball/wrestling)	0	1	2	3
S.	Indoor swimming pools	0	1	2	3
T.	Performing arts venues	0	1	2	3
U.	Teen center	0	1	2	3
V.	Senior center	0	1	2	3
W.	Banquet facility / Meeting space	0	1	2	3
X.	Campgrounds	0	1	2	3
Y.	Spraygrounds or splash pads	0	1	2	3
Z.	Fitness trail / PAR course	0	1	2	3

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 and numbers below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

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

12. Please indicate if you or any member of your household has a need for each of the parks and recreational **facilities programs** listed below by circling the number for how well your need is being met. Rank the responses from (0) which indicates you do not need the program to (3) which indicates your need is completely being met.

	Type of Program	How Well Are Your Needs Being Met by Programs?			
		Do Not Need Program	Need is not met at all	Need is somewhat met	Need is completely met
A.	Youth Learn to Swim programs	0	1	2	3
B.	Pre-School programs	0	1	2	3
C.	Babysitting/ child care	0	1	2	3
D.	Before and after school programs/ childcare	0	1	2	3
E.	Youth summer camp programs	0	1	2	3
F.	Youth sports programs	0	1	2	3
G.	Youth fitness and wellness programs	0	1	2	3
H.	Martial arts programs	0	1	2	3
I.	Adult fitness and wellness programs	0	1	2	3
J.	Water fitness programs	0	1	2	3
K.	Youth art, dance, performing arts	0	1	2	3
L.	Adult art, dance, performing arts	0	1	2	3
M.	Adult sports programs	0	1	2	3
N.	Senior adult programs	0	1	2	3
O.	Programs for mental/physically challenged	0	1	2	3
P.	Birthday parties	0	1	2	3
Q.	Pet Exercise / Dog Park	0	1	2	3
R.	Teen programs	0	1	2	3
S.	Special events / Community festivals	0	1	2	3
T.	Nature programs	0	1	2	3
U.	Local history programs	0	1	2	3
V.	Gymnastics and tumbling programs	0	1	2	3
W.	Tennis lessons and leagues	0	1	2	3
X.	Adult education & enrichment classes	0	1	2	3
Y.	Other: _____	0	1	2	3

13. Which FOUR of the programs from the list in Question #12 are most important to your household? [Using the letters in Question #12 above, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

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

14. Which FOUR of the programs from the list in Question #12 do you currently participate in MOST OFTEN? [Using the letters in Question #11 above, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

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

15. Listed below are potential improvements that could be made to the existing parks in the City of Fairfax. Please check ALL the improvements you would most like to have made to the existing parks in the City of Fairfax.

- | | | |
|--|--|---|
| <input type="checkbox"/> Park entrance signs | <input type="checkbox"/> Playground equipment | <input type="checkbox"/> Artificial turf fields |
| <input type="checkbox"/> Improved parking | <input type="checkbox"/> Bike racks | <input type="checkbox"/> Park security lighting |
| <input type="checkbox"/> Sidewalks/trails | <input type="checkbox"/> Picnic shelters | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Drinking fountains | <input type="checkbox"/> Picnic tables/benches | <input type="checkbox"/> Increased programs |
| <input type="checkbox"/> Improve/add restrooms | <input type="checkbox"/> Outdoor basketball courts | <input type="checkbox"/> More info & registration |
| <input type="checkbox"/> Trail lighting | <input type="checkbox"/> Sports fields lighting | <input type="checkbox"/> Add security cameras |
| <input type="checkbox"/> Natural areas | <input type="checkbox"/> Bike trails & bike lanes | <input type="checkbox"/> Wider roads |
| <input type="checkbox"/> Dog park | <input type="checkbox"/> Handicap accessibility | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Expand trails | <input type="checkbox"/> Add urban green spaces | |

16. Please check ALL the ways you learn about recreation or activities.

- | | |
|--|--|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Visited or called a City office |
| <input type="checkbox"/> Leisure Times Brochure | <input type="checkbox"/> City of Fairfax Government |
| <input type="checkbox"/> Word of mouth | <input type="checkbox"/> City Scene Newsletter |
| <input type="checkbox"/> Website | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Social networking | <input type="checkbox"/> Cable television (Channel 12) |
| <input type="checkbox"/> Chamber of Commerce/Tourism | <input type="checkbox"/> School newsletter |
| <input type="checkbox"/> Youth sports organization | <input type="checkbox"/> Other: _____ |

17. How long are you willing to drive to attend programs or use park and recreation facilities?

- 0-5 minutes 5-10 minutes 10-15 minutes 15-30 minutes Over 30 minutes

18. What time of day is most convenient for you or your household members to attend programs or use facilities?

- midnight to 6:00 am 6:00 am to noon Noon to 6:00 pm 6:00 pm to 9:00 pm 9:00 pm to midnight

19. If you had \$100 in new funding, how would you allocate the \$100 among the following types of parks and recreation improvements in City of Fairfax? [Please be sure your total adds up to \$100.]

- \$ _____ Acquisition of land for open space/green space / future park land
- \$ _____ Development of new walking and biking trails
- \$ _____ ~~Improvements/maintenance of existing parks, playgrounds, game courts and picnic areas~~
- \$ _____ Improvements/construction of new athletic fields (i.e. softball, soccer, baseball, football, etc.)
- \$ _____ Development of a new outdoor family aquatic center (swimming pool)
- \$ _____ Development of new outdoor parks and recreation facilities (i.e. playgrounds, shelters, etc.)
- \$ _____ Development of new indoor recreation facilities (i.e. gyms, exercise equipment, pools, etc.)
- \$ _____ Develop new or improve senior center facilities.
- \$ _____ Other: _____
- \$ 100 TOTAL**

20. Please CHECK ALL the reasons that prevent you or other members of your household from using RECREATION FACILITIES, TRAILS, EVENTS AND PROGRAMS of the City of Fairfax more often.

PARKS,

- | | |
|--|--|
| <input type="checkbox"/> Facilities are not well maintained | <input type="checkbox"/> Use facilities in other park systems |
| <input type="checkbox"/> Program or facility not offered | <input type="checkbox"/> Poor customer service by staff |
| <input type="checkbox"/> Facilities don't have the right equipment | <input type="checkbox"/> Security or safety of facilities |
| <input type="checkbox"/> Lack of quality programs | <input type="checkbox"/> Use other agencies in City of Fairfax |
| <input type="checkbox"/> Too far from our residence | <input type="checkbox"/> I do not know what is being offered |
| <input type="checkbox"/> Lack of transportation | <input type="checkbox"/> Facilities operating hours not convenient |
| <input type="checkbox"/> Class full | <input type="checkbox"/> Registration for programs is difficult |
| <input type="checkbox"/> Fees are too high | <input type="checkbox"/> Availability of parking |
| <input type="checkbox"/> Program times are not convenient | <input type="checkbox"/> Safety concerns |
| <input type="checkbox"/> Personal disability | <input type="checkbox"/> Other: _____ |

Demographics – This demographic information is requested to ensure the City of Fairfax plans effectively to meet the current and future needs of our diverse community.

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21. Counting yourself, how many people live in your household? _____

22. 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 _____ | |

23. Your Gender: Male Female

24. What is your age? _____

25. Please indicate if you are affiliated with George Mason University. (Check one if it applies)

- I am a student at GMU.
 I am a faculty or staff member of GMU.
 I am an alumnus of GMU.

26. Are there any persons with disabilities living in your household?

- Yes No

27. Are you of Hispanic, Latino or Spanish origin? Yes No

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27-28. What is your race? (Mark (X) one or more boxes.)

- | | | |
|---|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black, African Am., or Negro | <input type="checkbox"/> American Indian or Alaska Native |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Japanese | <input type="checkbox"/> Native Hawaiian |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Korean | <input type="checkbox"/> Guamanian or Chamorro |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> Other Asian -- e.g., <i>Hmong, Laotian, Thai Pakistani</i> | <input type="checkbox"/> Other Pacific Islander -- for example, <i>Fijian or Tongan</i> | |
| <input type="checkbox"/> Some other race -- Print race. --> _____ | | |

28. Are you of Hispanic, Latino or Spanish origin? Yes No

This concludes the survey. Thank you for your time!

Please Return Your Completed Survey in the Enclosed Postage Paid Envelope Addressed to:
 George Mason University
 Center for Social Science Research, MS 1H5
 4400 University Drive
 Fairfax, VA 22030

ONLY be used to help identify areas with special interests.