Town of Sullivan Parks & Recreation Dept. Community Needs Assessment

The Town of Sullivan Parks & Recreation Dept. would like your input to help determine parks and recreation priorities for our community. Your assistance in completing this survey is needed in order for us to move forward and plan for the future. All surveys must be completed no later than July 31, 2024.

1. What is your age range?			
	0	18-24	
	\bigcirc	25-34	
	\bigcirc	35-44	
	0	45-54	
	\bigcirc	55-64	
	0	65+	
2.		se indicate ALL programs you, or someone in your household, participated in during last 12 months:	
		Youth Programs	
		Family/Special Events	
		Adult/Senior Instructional Programs	
		Adult/Senior Fitness Programs	
		Senior Citizen Luncheons/Bus Trips	
3.	Wh	at additional programs would you like to see offered by our department?	
		And the control of th	

4. From the following list, please check ALL recreation activities in Sullivan or Chapman Park that you or any member of your household have used or visited in the past 12 months.
Picnic/Pavilion Rentals
Playgrounds
Concerts
Walking Trails
Tennis/Pickleball
Disc Golf
Fishing Pier
Dog Park
Bocce
Soccer
Basketball
Volleyball
Kickball/Baseball
Sledding/Snowshoeing/Cross Country Skiing
Geocaching
Other
5. How would you rate the quality of the parks in the Town of Sullivan? If not applicable, please do not answer.
C Excellent
Good
→ *Fair
○ *Poor
6. If you answered *Fair or *Poor to question 5, please explain.
en e

7. From the following list, please check any reasons that prevent you from using any Town of Sullivan Parks.
Facilities not maintained
Facilities lack proper equipment
Lack of programming
Lack of age-appropriate activities
Park does not offer specific activity
Not handicap accessible
Lack of parking near facilities
Not enough time
Too far from my residence
I do not know locations of parks
Use parks elsewhere
Do not enjoy the outdoors
Do not feel safe in the parks
Other
8. What additional facilities would you like to see included in the Town of Sullivan Park system? (Rank in order of importance)
Outdoor Fitness Equipment
More accessible playground equipment
Chittenango based dog park
Equipment Rentals in the parks
Indoor sports facility (turf/court)
Community events space
Splash pad

9.	When contacting the Town of Sullivan Parks & Recreation Dept. with a question or concern, was the staff helpful or knowledgeable and did they resolve the question or concern to your satisfaction?
	Yes
	○ No
10.	If your answer to the above questions is no, please explain.
11.	Are you a resident of the Town of Sullivan?
	○ Yes
	○ No
12	. Ho many people currently live at your residence?
	O 1
	O 2
	O 4
	5 or more
13	. How many people UNDER the age 18 currently live at your residence?
	O 1
	O 2
	O 4
	O 5 or more

14. From the following list, please check ALL the ways in which you learn about upcoming programs, classes and/or events.
Brochure - mailed to you
Brochure - emailed to you
Brochure - downloaded from our website
Monthly emails
Program list on website
School flyers
Facebook/Instagram announcements
Community sign board
Friends/Family/Instructors
15. From the list above, please list the method that is most effective for you.
16. Do you have any comments or concerns about a topic that wasn't covered with this survey?
17. If you would like to be entered into a drawing for a Town of Sullivan Parks & Recreation Dept. program gift certificate for \$50.00, please enter your email below. Random drawing will be on July 31, 2024.
This content is neither created nor endorsed by Microsoft. The data you submit will be sent to the form owner.