

1. Your Zip Code: _____

2. How often do you visit Algonquin Park?

- Every day
- 2 to 3 times a week
- About once a week
- Once a month
- A few times a year
- Never

3. How do you travel to Algonquin Park?

- Walk from home
- Ride a bike
- Drive or ride in a car
- Take a TARC bus

4. Please check all the things you do while visiting Algonquin Park:

- Picnic with family
- Bring kids to the playground
- Walk or jog on the path
- Read or study
- Sit and relax
- Attend weddings or parties
- Play tennis
- Play basketball
- Walk your dog
- Have a family reunion
- Attend concerts
- Swim in the pool
- Attend community festivals

Other: _____

5. Please check up to 5 things you would like to see improved at Algonquin Park:

- Condition of walks
- Stormwater drainage
- Restrooms
- Playground
- Lighting
- Parking
- Visitor safety
- Places to sit
- Places to picnic
- Swimming pool
- Places for sculpture or artwork
- Condition of grass areas
- Condition or number of trees
- General maintenance

Other: _____

6. What activities would encourage you to visit Algonquin Park more often?

- Outdoor workshop & classes
- Farmer's Market
- Heritage festival
- Music concerts
- Cultural festivals
- Horseshoes
- Volleyball
- Softball league
- Basketball league
- Kids' football league
- Holiday special events

Other: _____

7. What do you like best about Algonquin Park?

8. What do you NOT like about Algonquin Park?

9. What improvements or additions would encourage you to visit Algonquin Park more often?

- Perimeter walking path
- 1/4-mile walking/jogging track
- More water fountains
- More benches
- More basketball courts
- A stage or performance space
- Large group picnic shelter
- Flower gardens
- Vegetable gardens
- Outdoor art or sculptures

Other: _____

10. How safe do you feel when you're in or near Algonquin Park at the following times and days?

	Safe	Mostly safe	A little unsafe	Unsafe
9-5 M-F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-dark M-F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9-5 Sat/Sun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-dark Sat/Sun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>