MOON TOWNSHIP COMPREHENSIVE PARKS, RECREATION, AND OPEN SPACE PLAN

COMMUNITY SURVEY

----------*QUALITY OF LIFE*----------

1. How important is recreation to you and your family **(check one)**?
   ❒ Very Important ❒ Important ❒ Somewhat Important ❒ Not at all

2. How important are the following to improving your quality of life as a Moon Twp. resident? **(check one for each)**

Parks	❒ Very Important	❒ Important	❒ Somewhat Important	❒ Not at all
Recreation programs	❒ Very Important	❒ Important	❒ Somewhat Important	❒ Not at all
Developed Trails	❒ Very Important	❒ Important	❒ Somewhat Important	❒ Not at all
Greenways	❒ Very Important	❒ Important	❒ Somewhat Important	❒ Not at all
Public open space	❒ Very Important	❒ Important	❒ Somewhat Important	❒ Not at all

----------*PROGRAMS*----------

3. If new recreation programs would be offered, what age group should they target? **(check no more than two)**
   ❒ 0-5 yrs ❒ 5-12 yrs ❒ 13-18 yrs ❒ 19-30 yrs ❒ 31-44 yrs ❒ 45-50 yrs ❒ 51-64 yrs
   ❒ 65-74 yrs ❒ 75+ yrs

4. Check any of the current activities in which you or your family participates **(Check all that apply).**

Easter Bunny Trail		Summer Camps		Baseball	
Earth Day		Tennis Lessons		Softball	
Fathers' Day Fun Fair		Craft Classes		Soccer	
July 4th Celebration		Youth Basketball		Hockey	
Family Fun Nights		Farmer's Market		Concerts	
Swimming		Art Show		Other _____	

5. If you do participate in any of the above activities, are there any improvements you would like to see?
   _____
   _____
   _____

6. If you do not participate in the above activities, what changes would make you attend?
   _____
   _____
   _____

7. Check any of the activities in which you or your family may participate

Book Clubs		Bird Watching		Adult / Co-Ed Flag Football	
Lectures		Summer Camps		Cross Country Skiing	
Computer		Animal Awareness		Golf	
Cooking classes		Outdoor ice skating		Skateboarding	
Gardening		Sand Volleyball		Deck Hockey	
Card Clubs		Youth Lacrosse		Fishing	
Crafts		Health and fitness program		Bicycling	
Nature Walks		Adult / Co-Ed Basketball		Other _____	

----------*FACILITIES*----------

8. For the following list, please indicate if the facility is adequate, should be improved, or needs a lot of attention

	Adequate	Should be improved	Needs a lot of attention	No Opinion
Moon Park				
Robin Hill Park				
Overlook Play Lot				
Cedar Drive Play Lot				
Amherst Play Lot				
Loch Shin Play Lot				
Meade Drive Play Lot				
Whispering Woods Ball Field				
Private Ball Fields				

	Adequate	Should be improved	Needs a lot of attention	No Opinion
Montour Trail				
Robin Hill Trails				
Moon Park Trails				
Golf Courses				
Private Recreation Facilities				
OTHER				

9. What do you like best about the township parks? (**Check no more than three)**

- ☐ parking
- ☐ handicap access
- ☐ amount of organized activity
- ☐ amount of lighting
- ☐ amount of picnic facilities
- ☐ lack of loitering
- ☐ lack of litter
- ☐ amount of refreshments
- ☐ location
- ☐ amount of facilities
- ☐ amount of open play areas
- ☐ amount of restrooms
- ☐ amount of shade
- ☐ maintenance
- ☐ lack of drugs & alcohol
- ☐ overcrowding
- ☐ size
- ☐ lack of insects
- ☐ access
- ☐ amount of natural features
- ☐ amount of water fountains
- ☐ amount of paths/walkways
- ☐ lack of vandalism & graffiti
- ☐ appropriate facilities
- ☐ costs
- ☐ lack of animal wastes
- ☐ other _____

10. What do you like least about the township parks? (**Check no more than three)**

- ☐ don't know where they are
- ☐ inappropriate facilities
- ☐ lack of organized activity
- ☐ lack of lighting
- ☐ lack of picnic facilities
- ☐ loitering
- ☐ litter
- ☐ lack of refreshments
- ☐ poor location
- ☐ animal wastes
- ☐ no pets allowed
- ☐ lack of parking
- ☐ lack of open play areas
- ☐ lack of restrooms
- ☐ lack of shade
- ☐ poor maintenance
- ☐ drug & alcohol usage
- ☐ inadequate parking
- ☐ too small
- ☐ poor access
- ☐ poison ivy
- ☐ other _____
- ☐ lack of facilities
- ☐ lack of natural features
- ☐ lack of water fountains
- ☐ lack of paths/walkways
- ☐ vandalism & graffiti
- ☐ loud noises
- ☐ overcrowding
- ☐ no handicap access
- ☐ costs
- ☐ many insects

MOON TOWNSHIP COMPREHENSIVE PARKS, RECREATION, AND OPEN SPACE PLAN

COMMUNITY SURVEY

----------*FUNDING*----------

11. Would you want a portion of your taxes to go to parks? ☐ Yes ☐ No

12. Would you pay user fees for park facilities and programs? ☐ Yes ☐ No

13. Would you support a dedicated tax for park facilities and programs? ☐ Yes ☐ No

14. Would you donate money to support parks, recreation and trails/greenways? ☐ Yes ☐ No
    If yes, how much would you be willing to contribute? ☐ $20/year ☐ $50/year ☐ $100/year ☐ $500/year or more

15. If the township could financially support the development of one recreation project, which should it be? (**Check one**)
    ☐ Community Center ☐ Pool ☐ Extension of trails ☐ More Programs
    ☐ Museum ☐ ATV Trail ☐ Acquisition of Open Space ☐ Other _____

----------*YOUR HOUSEHOLD*----------

16. What factors prohibit members of your household from using facilities or attending programs? **(Check all that apply)**
    ☐ Parks / trails not well maintained
    ☐ Parks / trails not safe
    ☐ Parks / trails too crowded
    ☐ Parks / trails locations too hard to find
    ☐ Parks / trails not ADA / handicap accessible
    ☐ Parks / trails too far away from my house
    ☐ Parks / trails too hard to access
    ☐ Programs are too hard to register
    ☐ Program times inconvenient
    ☐ Programs or user fees too expensive
    ☐ Programs offered do not have what I am interested in
    ☐ Programs are not well publicized
    ☐ other _____

17. Please circle the number of people in your household in each age category:

AGE	NUMBER OF HOUSEHOLD MEMBERS							
0-5	0	1	2	3	4	5	6	7
6-9	0	1	2	3	4	5	6	7
10-19	0	1	2	3	4	5	6	7
20-29	0	1	2	3	4	5	6	7
30-44	0	1	2	3	4	5	6	7
45-64	0	1	2	3	4	5	6	7
65+	0	1	2	3	4	5	6	7

18. What is your age? _____

19. What is your household income range?
    ☐ Less than $10,000 ☐ $10,000 to $24,999
    ☐ $25,000 to $49,999 ☐ $50,000 to $99,999
    ☐ $100,000 and over

20. Would you be interested in volunteering your time or equipment to Moon Twp. Parks & Recreation Dept.? ☐ Yes ☐ No
    If Yes, please give us your name and contact information

_____

_____

Please use the space provided below to provide additional comments regarding Moon Township's park and recreation facilities and services. If you need more space, please attach additional pages as needed and return with your survey

_____

_____

_____

Thank you for participating in Moon Township's Comprehensive Recreation, Parks and Open Space Plan Study!!