

PENOBSCOT BAY YMCA SURVEY

1. Where do you live? _____
2. Do you live there: YEAR-ROUND SEASONAL
3. Are you: Male Female
4. How old are you? _____
5. How many people are in your household? _____
6. Do you presently use, or are you a member of, the Penobscot Bay YMCA? YES NO
7. If "YES", what YMCA programs or services do you use? List: _____

8. If not a YMCA member, do you belong to another health or fitness club? YES NO
9. Would you be likely to join or use the YMCA if it was located in the Thomaston/So. Thomaston area? YES NO
10. What YMCA program areas would you or your family be most likely to use?

	Likely to use	Might use	Not likely to use
Exercise/Fitness Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool (regulation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapy Pool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk/jog Track	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children's Play Gym	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gymnasium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rock Climbing Wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor Children's Playground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____			

11. What YMCA programs would you or your family be most likely to use?

	Likely to use	Might use	Not likely to use
Group Fitness Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Training Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Exercise Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Aquatic Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Sports Programs (basketball, volleyball)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Martial Arts Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care Services (drop in while using facility)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care Services (all day)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Programs for Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summer Camp for Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Aquatic Programs (Learn to Swim)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yoga or Pilates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dance Classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____			

12. How important is it to you that a new YMCA facility be located within downtown Thomaston?
 VERY Important SOMEWHAT Important NOT Important

13. What other requirements should a new YMCA facility meet? Please list. _____

14. Please share any other comments or thoughts you have about a new YMCA facility in the Thomaston/ So. Thomaston area. _____

Please submit survey by Feb. 20 to: **Penobscot Bay YMCA, PO Box 840, Rockport, ME. 04856**