KNOX COUNTY PARKS & RECREATION PROGRAM SURVEY

Knox County is interested in your opinion of our programs and facilities. Results are used to help determine the quality of our programs and are confidential.

Park/Facility

Activity:

Date:	Park/Facility	Activity:				
Please list y	our home zip code:					
Please circle your present involvement:		1. Participant		2. Parent		3. Spectate
		4. Coach		5. volunteer		
1.Please rat	te the quality of the following i	tems:				
		Very Good	Goo	d	Poor	Very Poor
Program Q	uality	4	3	3	2	1
Program In	nformation	4	3	3	2	1
Cost of Pro	ogram	4	:	3	2	1
Park/Facili	ity Appearance	4	3	3	2	1
Park Struc	tures (parking, restrooms, etc.) 4	3	3	2	1
Park Safety	y	4	,	3	2	1
Overall Ra	ting	4	•	3	2	1
Comments	, Compliments, Complaints:					
Optional:	A dda				Phon	a·
Name:	Address:				1 11011	·

Please return this survey on-site or to: 2447 Sutherland Avenue, Knoxville, TN 37919 Fax to: 215-6603

KNOX COUNTY PARKS & RECREATION SPORTS PROGRAM SURVEY

Knox County is interested in your opinion of our programs. Results are used to help determine the quality of our programs and are confidential. Please circle your response to each question.

1. Please rate the quality of the following items:

	Very Good	Good	Poor	Very Poor
Registration information	4	3	2	1
Program information	4	3	2	1
Cost of program	4	3	2	1
Team selection process	4	3	2	1
Practice facility	4	3	2	1
Game facility (s)	4	3	2	1
Coaches	4	3	2	1
Officials	4	3	2	4

Please indicate in which program you (your children) are participating?

Boys Girls** Both**

Teams were evenly matched: always sometimes seldom never

Have you participated in a Knox County program before? Yes No

If yes, please circle the sports in which you or your family member(s) have previously participated: baseball softball basketball football golf

Please rate Knox County programs overall: Very Good Good Poor Very Poor

Comments:

KNOX COUNTY PARKS & RECREATION COACHES SPORTS PROGRAM SURVEY

Knox County is interested in your opinion of our programs. Results are used to help determine the quality of our programs and are confidential. Please circle your

response to each question. 1. Please rate the quality of the following items:

	Very Good	Good	Poor	Very Poor
Registration information	4	3	2	1
Program information	4	3	2	1
Cost of program	4	3	2	1
Team selection process	4	3	2	1
Practice facility	4	3	2	1
Game facility (s)	4	3	2	1
Team Competition	4	3	2	1
Officials	4	3	2	4
Overall Rating	4	3	2	4

Please indicate in which program you (your children) are participating? boys girls adult

List hosting community organization:

Please list current sport:

Comments/proposed changes:

Please return this survey to your gym or field Director Or return to 2447 Sutherland Avenue, Knoxville, TN 37919 Fax to: 215-6603