

Holmdel Township

4 Crawfords Corner Road
Holmdel, New Jersey 07733

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September 2017

Dear Holmdel Township Resident,

Your response to the enclosed survey is very important...

Holmdel Township is conducting a comprehensive parks and recreation needs assessment survey. The results of this survey will be used to establish priorities for improvements to the parks and recreation facilities in the community.

We appreciate your time...

We realize that this survey will take approximately 10 minutes to complete, but each question is important. The time you invest in completing this survey will aid the Township in taking a resident-driven approach to making decisions that will enrich the future of our community and positively affect the lives of all its residents.

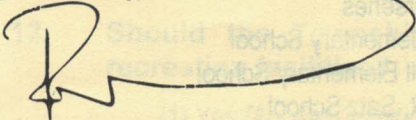
Please complete and return your survey before October 6th, 2017.

We have selected ETC Institute, an independent consulting company, as our partner to administer this survey. They will compile the data received and present the results to the Township. **Your responses will remain confidential.** Please return your completed survey in the enclosed postage-paid envelope addressed to ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061. If you would like to take the survey over the web, the address is <http://holmdelsurvey.org/>.

If you have any technical questions regarding the on-line survey, please feel free to contact ETC Institute at (913) 829-1215.

Thank you for your time. We look forward to hearing your opinions.

Sincerely,



Robert Ward,
Recreation Director

Holmdel Township Parks and Recreation Needs Assessment

Let your voice be heard today!

Holmdel Township would like your input to help determine park and recreation priorities for our community. Parks and recreation facilities contribute significantly to our quality of life in Holmdel, and your opinions are very important to us. This survey will take 10-15 minutes to complete. When you are finished, please return your survey in the enclosed postage-paid, return-reply envelope. We greatly appreciate your time.

1. In what Brush Removal Section of the Township do you reside? (If you are unsure, please use the following link to the Township's website to identify your section based on the street you live on: www.holmdeltownship-nj.com/DocumentCenter/View/164)

___(1) Section A ___(2) Section B ___(3) Section C ___(4) Section D

2. Approximately how long have you lived in Holmdel Township?

___(1) Less than 5 Years ___(3) 10-15 Years ___(5) 21+ Years
___(2) 5-10 Years ___(4) 15-20 Years

3. Counting yourself, how many people in your household are...

Under age 5: ___ Ages 15-19: ___ Ages 35-44: ___ Ages 65-74: ___
Ages 5-9: ___ Ages 20-24: ___ Ages 45-54: ___ Ages 75+: ___
Ages 10-14: ___ Ages 25-34: ___ Ages 55-64: ___

4. How often do you and members of your household use the Township's parks/facilities for recreation purposes?

___(1) Daily ___(3) Monthly ___(5) Rarely (Answer Q4a)
___(2) Weekly ___(4) Occasionally ___(6) Never (Answer Q4a)

4a. If your response to Question 4 was "Rarely" or "Never" please provide a brief description of why.

5. From the following list, please select ALL the Holmdel Township, Holmdel Board of Education, or Monmouth County parks/open space areas you have used or visited in the past 12 months. (A Map of the Township's & County's facilities can be found here: <http://www.holmdelrec.com/541/3352/Map-of-Holmdels-Parks?activeLiveTab=widgets>)

___(01) Holmdel Park (County)	___(12) Veterans Memorial Park
___(02) Ramanessin Brook Conservation Area (County)	___(13) Mahoras Greenway
___(03) Thompson Park (County)	___(14) Tricarico Property
___(04) Ackerson Park	___(15) Ramanessin Brook Greenway
___(05) Allocco Park	___(16) Neil Waackaack Preserve
___(06) Bayonet Farm	___(17) F & F Nurseries
___(07) Cross Farm Park	___(18) Village Elementary School
___(08) DePalma Farm	___(19) Indian Hill Elementary School
___(09) Holmdel Swim & Tennis Club	___(20) William R. Satz School
___(10) Labbe Park	___(21) Holmdel High School
___(11) Phillips Park	___(22) Holmdel Senior/Community Center

6. Which THREE parks, open spaces, or facilities from the list in Question 5 do you and members of your household visit MOST OFTEN? [Write-in your answers below using the numbers from the list in Question 5, or circle "NONE".]

1st: ___ 2nd: ___ 3rd: ___ NONE

7. From the following list, please select ALL of the reasons why you and members of your household visit the facilities you frequent the most. [Check all that apply.]

- | | | |
|--|--|---|
| <input type="checkbox"/> (01) Organized sports/leagues | <input type="checkbox"/> (07) Football | <input type="checkbox"/> (13) Relaxation/meditation |
| <input type="checkbox"/> (02) Basketball | <input type="checkbox"/> (08) Soccer | <input type="checkbox"/> (14) Biking |
| <input type="checkbox"/> (03) Tennis | <input type="checkbox"/> (09) Playgrounds for children | <input type="checkbox"/> (15) Fishing |
| <input type="checkbox"/> (04) Baseball | <input type="checkbox"/> (10) Walking/Hiking | <input type="checkbox"/> (16) Dog walking |
| <input type="checkbox"/> (05) Softball | <input type="checkbox"/> (11) Exercise | <input type="checkbox"/> (17) Special events |
| <input type="checkbox"/> (06) Lacrosse | <input type="checkbox"/> (12) Sightseeing | <input type="checkbox"/> (18) Other: _____ |

8. Which FIVE of the following recreation facility elements are most important to you and the members of your household? [Check only 5.]

- | | | |
|--|--|--|
| <input type="checkbox"/> (01) Programmed sports | <input type="checkbox"/> (11) Playgrounds | <input type="checkbox"/> (22) Trash/recycle facilities |
| <input type="checkbox"/> (02) Sports fields | <input type="checkbox"/> (12) Exercise equipment | <input type="checkbox"/> (23) Access to water (river, streams) |
| <input type="checkbox"/> (03) Sports courts (tennis, basketball, pickleball, etc.) | <input type="checkbox"/> (13) Landscaping | <input type="checkbox"/> (24) Drinking fountains |
| <input type="checkbox"/> (04) Parking | <input type="checkbox"/> (14) WIFI connectivity | <input type="checkbox"/> (25) Food service |
| <input type="checkbox"/> (05) Connection to neighborhoods | <input type="checkbox"/> (15) Grilling/outdoor cooking | <input type="checkbox"/> (26) Pet friendly facilities |
| <input type="checkbox"/> (06) Security/safety | <input type="checkbox"/> (16) Natural vegetation | <input type="checkbox"/> (27) Maintenance |
| <input type="checkbox"/> (07) Covered gather areas/pavilion | <input type="checkbox"/> (17) Education | <input type="checkbox"/> (28) Proximity/Location |
| <input type="checkbox"/> (08) Lighting | <input type="checkbox"/> (18) Views/sight-seeing | <input type="checkbox"/> (29) Other: _____ |
| <input type="checkbox"/> (09) Restrooms | <input type="checkbox"/> (19) Signage | |
| <input type="checkbox"/> (10) Benches/tables | <input type="checkbox"/> (20) Paths/Trails | |
| | <input type="checkbox"/> (21) Handicap accessible | |

9. Does the Township currently have an adequate number of active recreation facilities? ("Active recreation," for the purposes of this survey, is defined as dedicated league-oriented sports play requiring a field or paved surface court and playgrounds, e.g. baseball, softball, and lacrosse fields, basketball, tennis, and pickleball courts, etc.)

- (1) Yes (2) No (3) Undecided

10. Should the Township consider the improvement, development, or expansion of active recreation facilities?

- (1) Yes [Answer Question 10a.] (2) No (3) Undecided

10a. If "Yes" to Question 10, please list the active facilities you think should be improved, developed, or expanded below.

11. Does the Township currently have adequate passive open space areas and facilities? ("Passive recreation," for the purposes of this survey, is defined as self-directed, non-sports-oriented activities, e.g. jogging, hiking, social gathering, nature observation, etc.)

- (1) Yes (2) No (3) Undecided

12. Should the Township consider the improvement, development, or expansion of passive recreation facilities?

- (1) Yes [Answer Question 12a.] (2) No (3) Undecided

12a. If "Yes" to Question 12, please list the passive facilities you think should be improved, developed, or expanded below.

13. Please indicate if YOU or any member of your HOUSEHOLD has a desire for each of the following Parks and Recreation facilities. If "Yes", please rate all the facilities of that type on a scale of 5 to 1, where 5 means the desires of your household are "100% Met" and 1 means "0% Met".

Type of Facility	Do you have a desire for this facility?		If "Yes", how well are your desires being met?				
	Yes	No	100% Met	75% Met	50% Met	25% Met	0% Met
01. Walking and hiking trails	Yes	No	5	4	3	2	1
02. Biking and mountain biking trails	Yes	No	5	4	3	2	1
03. Swimming facilities	Yes	No	5	4	3	2	1
04. Nature trails	Yes	No	5	4	3	2	1
05. Equestrian trails	Yes	No	5	4	3	2	1
06. Tennis courts	Yes	No	5	4	3	2	1
07. Fishing areas	Yes	No	5	4	3	2	1
08. Disc (Frisbee) Golf	Yes	No	5	4	3	2	1
09. Nature interpretive centers	Yes	No	5	4	3	2	1
10. Splash pad/waterparks	Yes	No	5	4	3	2	1
11. Small neighborhood parks	Yes	No	5	4	3	2	1
12. Indoor Recreation Center	Yes	No	5	4	3	2	1
13. Miniature golf course	Yes	No	5	4	3	2	1
14. Natural areas/wildlife areas	Yes	No	5	4	3	2	1
15. Outdoor amphitheater	Yes	No	5	4	3	2	1
16. Large special event site	Yes	No	5	4	3	2	1
17. Historic sites	Yes	No	5	4	3	2	1
18. Bocce courts	Yes	No	5	4	3	2	1
19. Picnicking areas and shelters	Yes	No	5	4	3	2	1
20. Barrier free Children's playgrounds	Yes	No	5	4	3	2	1
21. Natural Grass Fields	Yes	No	5	4	3	2	1
22. Synthetic Turf Fields	Yes	No	5	4	3	2	1
23. Baseball Fields	Yes	No	5	4	3	2	1
24. Softball Fields	Yes	No	5	4	3	2	1
25. Lacrosse Fields	Yes	No	5	4	3	2	1
26. Lighted Fields	Yes	No	5	4	3	2	1
27. Outdoor basketball courts	Yes	No	5	4	3	2	1
28. Indoor basketball courts	Yes	No	5	4	3	2	1
29. Youth Center	Yes	No	5	4	3	2	1
30. Cross country skiing	Yes	No	5	4	3	2	1
31. Outdoor ice-skating areas	Yes	No	5	4	3	2	1
32. Skate park	Yes	No	5	4	3	2	1
33. Pickleball Courts	Yes	No	5	4	3	2	1
34. Roller Hockey Rink(s)	Yes	No	5	4	3	2	1
35. Outdoor Fitness Trail	Yes	No	5	4	3	2	1
36. Educational/Creative Arts Center	Yes	No	5	4	3	2	1
37. Off-Leash Dog Area	Yes	No	5	4	3	2	1
38. Lighted Sports Courts (basketball, tennis, etc.)	Yes	No	5	4	3	2	1
39. Zero Depth Entry Pool	Yes	No	5	4	3	2	1
40. Shuffleboard Courts	Yes	No	5	4	3	2	1
41. Special Needs fields/courts (e.g. Challenger League)	Yes	No	5	4	3	2	1
42. Other:	Yes	No	5	4	3	2	1

14. Which THREE facilities from the list in Question 13 on the previous page are MOST IMPORTANT to your household? [Write-in your answers below using the numbers from the list in Question 13, or circle "NONE".]

1st: ____ 2nd: ____ 3rd: ____ NONE

15. What is your overall opinion of the Holmdel Township Parks (including Phillips, Cross Farm Park, Bayonet Farm, etc.)?

____(4) Excellent ____ (3) Good ____ (2) Fair ____ (1) Poor

15a. If your response to Question 15 was "Fair" or "Poor", please provide a brief description of why.

16. Please CHECK ALL the ways you learn about Township information and news.

____(01) Word of mouth ____ (05) Email ____ (09) Radio
____(02) Telephone ____ (06) Township website ____ (10) Mail
____(03) Newspaper ____ (07) Social media ____ (11) Text
____(04) Posted advertisements/signage ____ (08) TV/local cable networks ____ (12) Other: _____

17. Which TWO of the methods from the list in Question 16 are your MOST PREFERRED ways of learning about Township information and news? [Write-in your answers below using the numbers from the list in Question 16, or circle "NONE".]

1st: ____ 2nd: ____ NONE

18. Which indoor recreation activities would you or members of your household participate in or utilize if they were offered at the township? [Check all that apply.]

____(01) Sports courts ____ (05) Educational classes ____ (09) Dance
____(02) Party rental space ____ (06) Arts & Crafts ____ (10) Other: _____
____(03) Fitness center ____ (07) E-Sports/Gaming
____(04) Wellness programs ____ (08) Martial arts

19. Please indicate if YOU or any member of your HOUSEHOLD has a desire for each of the following Parks and Recreation activities/programs. If "Yes", please rate all the activities/programs of that type on a scale of 5 to 1, where 5 means the desires of your household are "100% Met" and 1 means "0% Met".

Type of Activity	Do you have a desire for this activity?		If "Yes", how well are your desires being met?				
	Yes	No	100% Met	75% Met	50% Met	25% Met	0% Met
01. Adult arts, dance, performing arts	Yes	No	5	4	3	2	1
02. Adult continuing education programs	Yes	No	5	4	3	2	1
03. Adult fitness and wellness programs	Yes	No	5	4	3	2	1
04. Adult sports programs	Yes	No	5	4	3	2	1
05. Before and after school programs	Yes	No	5	4	3	2	1
06. Birthday parties	Yes	No	5	4	3	2	1
07. Golf lessons and leagues	Yes	No	5	4	3	2	1
08. Gymnastics/tumbling programs	Yes	No	5	4	3	2	1
09. Martial arts programs	Yes	No	5	4	3	2	1
10. Nature programs/environmental education	Yes	No	5	4	3	2	1
11. Indoor sports programming	Yes	No	5	4	3	2	1
12. Special Needs Activities/Programs	Yes	No	5	4	3	2	1
13. Preschool programs	Yes	No	5	4	3	2	1
14. Active Adult programs 50 & up	Yes	No	5	4	3	2	1
15. Community based special events	Yes	No	5	4	3	2	1
16. Teen programs	Yes	No	5	4	3	2	1
17. Tennis lessons and leagues	Yes	No	5	4	3	2	1
18. Water fitness programs	Yes	No	5	4	3	2	1
19. Youth art, dance, performing arts	Yes	No	5	4	3	2	1
20. Youth fitness and wellness programs	Yes	No	5	4	3	2	1
21. Youth learn to swim programs	Yes	No	5	4	3	2	1
22. Youth sports programs	Yes	No	5	4	3	2	1
23. Youth summer camp programs	Yes	No	5	4	3	2	1
24. Adult evening programming	Yes	No	5	4	3	2	1
25. Adult Leagues (Softball/flag football/etc.)	Yes	No	5	4	3	2	1
26. Outdoor Adventure program (hiking, biking, etc.)	Yes	No	5	4	3	2	1
27. Summer concert series	Yes	No	5	4	3	2	1
28. Outdoor movies	Yes	No	5	4	3	2	1
29. Senior Programming age 65 & up	Yes	No	5	4	3	2	1
30. Adult/Child programs	Yes	No	5	4	3	2	1
31. Family/Multi-generational programs	Yes	No	5	4	3	2	1
32. Other:	Yes	No	5	4	3	2	1

20. Which THREE activities from the list in Question 19 are MOST IMPORTANT to your household? [Write-in your answers below using the numbers from the list in Question 19, or circle "NONE".]

1st: _____ 2nd: _____ 3rd: _____ NONE

21. Do you or does any member of your household use the Holmdel School District properties for personal (non-league/organized) recreation or sports activities?

___(1) Yes ___(2) No

22. Do you or does any member of your household use the Holmdel School District properties for league/organized recreation or sports activities?

___(1) Yes ___(2) No [Skip to Question 24.]

23. If "Yes" to Question 21 or 22, please rank how frequently you use the following facilities from 1 to 4, where 1 is the MOST used and 4 is the LEAST used.

___ Village Elementary ___ Holmdel High School
___ Indian Hill Elementary ___ William R. Satz School

24. Are there other non-Township, County, or Board of Education owned facilities in Holmdel that you or any member of your household use for recreation, exercise, or relaxation?

___(1) Yes ___(2) No [Skip to Question 25.]

24a. Please provide the name of the facility you use, and select from the list the description which best describes that facility.

Name of Facility: _____

- ___(1) Private club (fitness, etc.)
- ___(2) Golf course
- ___(3) Cemetery
- ___(4) Private open space/woodland
- ___(5) Office park
- ___(6) Trails
- ___(7) Other: _____

25. How would you rate the overall management, maintenance, and general upkeep of the Township's Parks and Recreation facilities?

___(4) Excellent ___(3) Good ___(2) Fair ___(1) Poor

26. Please check ALL of the following reasons that prevent you or members of your household from using recreation facilities or programs offered by Holmdel MORE OFTEN. [Check all that apply.]

- ___(01) Facilities do not have the right equipment
- ___(02) Facilities are not well maintained
- ___(03) Facility operating hours are not convenient
- ___(04) Fees are too expensive
- ___(05) I do not know the location of facilities
- ___(06) I do not know locations of parks
- ___(07) I do not know what is being offered
- ___(08) Lack of accessibility at facilities and parks
- ___(09) Lack of parking
- ___(10) Lack of quality programs
- ___(11) Lack of transportation
- ___(12) Parks are not well maintained
- ___(13) Poor customer service by staff
- ___(14) Program times are not convenient
- ___(15) Programs I am interested in are not offered
- ___(16) Registration for programs is difficult
- ___(17) Security is insufficient (I do not feel safe)
- ___(18) Use facilities in other Cities/Park Districts
- ___(19) Use facilities/programs of other organizations
- ___(20) Use services of other agencies
- ___(21) Waiting list/programs are full
- ___(22) We are not interested
- ___(23) We are too busy
- ___(24) Other: _____

27. How would you rate your satisfaction with the overall value received from the Holmdel Township's Parks and Recreation Department?

- (5) Very Satisfied (3) Neutral (1) Very Dissatisfied
- (4) Satisfied (2) Dissatisfied (9) Don't Know

28. What is your age?

- (1) Under 25 years (3) 35 to 44 years (5) 55 to 64 years (7) 75 years or older
- (2) 25 to 34 years (4) 45 to 54 years (6) 65 to 74 years

29. Your gender: (1) Male (2) Female

30. Please provide comments or suggestions in the space provided below.

This concludes the survey – Thank you for your time!

Please return your completed survey in the enclosed return-reply envelope addressed to:
ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Your responses will remain completely confidential. The address information printed to the right will ONLY be used to help identify areas with specific needs. Thank you.

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