

Wheelchair Athletics/Activities/Recreation Survey

The purpose of this survey is to determine the wheelchair athletic/activity/recreational needs for the Denver area. It will take about ten minutes to complete. Please read each question carefully before responding, as the outcome of this survey will provide important information concerning your needs and requests. Accuracy of your feedback is important and meaningful.

If you have questions regarding this survey, contact Claire Monash at (303) 893-3104, clairemonash@netscape.net, or 1614 Osceola St., Denver, CO, 80204. If necessary, please use the self-addressed, stamped envelope to return this survey by **February 29, 2004**.

Thank you for taking the time to participate!

(If you would like to complete this survey anonymously, do not fill out Question 1)

1. Demographic Information:

Name: _____

Address: _____

City, State, ZIP: _____

Home phone: _____

Business phone: _____

Email: _____

2. Gender

a) Female

b) Male

3. Age: _____

4. Highest education level

a) High School or lower

b) Junior college or some college

c) Undergraduate

d) Graduate

e) Post-Graduate (Doctoral)

5. Annual income

a) Less than \$20,000

b) \$20,000 - \$40,000

c) \$40,000 - \$60,000

d) \$60,000 - \$80,000

e) More than \$80,000

6. Nature of disability

- a) Paraplegic
- b) Quadriplegic
- c) Polio (myelitis)
- d) Amputee
- e) Spina bifida
- f) Spinal Muscular Atrophy
- g) Cerebral Palsy
- h) Multiple Sclerosis
- i) Other: _____

7. Were you involved in athletics prior to your injury/health issue?

- a) Yes
- b) No

8. Are you currently involved in any athletic/activity/recreational program?

- a) Yes
- b) No

9. If you are not currently involved in any athletic/activity/recreational program, are you interested in joining a program?

- a) Yes
- b) No
- c) Maybe

10. If you are currently involved in an athletic/activity/recreational program, what program(s) are you involved in?

- | | |
|---|---|
| <input type="checkbox"/> a) Basketball | <input type="checkbox"/> g) Water sports |
| <input type="checkbox"/> b) Rugby | <input type="checkbox"/> h) Softball |
| <input type="checkbox"/> c) Sled Hockey | <input type="checkbox"/> i) Weightlifting |
| <input type="checkbox"/> d) Tennis | <input type="checkbox"/> j) Track and field |
| <input type="checkbox"/> e) Skiing | <input type="checkbox"/> k) Other: _____ |
| <input type="checkbox"/> f) Cycling | |

11. If you are currently involved in any athletic/activity/recreational program, are you playing at a competitive level (e.g. national or regional tournaments, etc.)?

- a) Yes
- b) No

12. If you are not playing at an elite or competitive level, would you like to be?

- a) Yes
- b) No
- c) Maybe

13. How many times a week do you work out or practice?

- a) None
- b) One to three times per week
- c) Three to five times per week
- d) More than five times per week

14. From one (very bad) to ten (excellent), how would you rate current recreational facilities in the Denver area for people with disabilities?

- | | | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

15. How far would you be willing to travel to a recreational facility?

- a) Five miles or less
- b) Five to ten miles
- c) Ten to 20 miles
- d) 20 to 30 miles
- e) 30 miles or more

16. Do you consider any of the following to be barriers to your participating in athletic/activity/recreational programs?

- a) Facility access
- b) Economic access
- c) Time
- d) Transportation
- e) Distance
- f) Other: _____

17. Please provide additional comments concerning your needs and requests.

Again, thank you for your time and participation in this important survey!

Please return by February 29, 2004.

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