APPENDIX B

Local Recreation Providers Survey

Of the following two questions which best describes your role in local parks and recreation provision?

1. I am a Superintendent of:
   A. County Parks and Recreation Department
   B. Township Parks and Recreation Department
   C. Municipal Parks and Recreation Department
   D. Other unit of local government (Street Department, Public Works)

   Note: Legally established for the following means a management body that complies with IC 36-10-3-3 and IC 36-10-3-4.

2. I am a member of:
   Municipal Board
   Was the municipal board legally established?  
   County Park Board
   Was the county park board legally established?  
   Township Park Board
   Was the township park board legally established?
   Other board

3. If other board was selected above, please indicate the name of the board and your primary role

4. Member of "Friends of" group or similar (nongovernmental management group)
   Yes  No
   What group?

5. Which of the following exist in your community? (Check all that apply.)
   A. Parks and Recreation Department
   B. Park Board (or Park and Recreation Board)
   C. "Friends of Parks" group or similar (nongovernmental management group)
   D. Other agency that manages local public parks and recreation.
   If "Other" was checked above, please put name in the box.

6. Which units of government are involved with providing local parks and/or recreation opportunities to citizens in your community? (Check all that apply.)
   A. County
   B. Township
C. Municipal (City or Town)
D. Other (Please explain)
If "Other" was checked above, please put name in the box:

7. What zip codes represent the community served by the local parks and recreation system? (Up to 8 zip codes)

Land and Facilities Management:

8. What is the total number of acres managed under the local park system?

9. How many of the acres in the local park system are developed (landscaped or has facilities)?

10. How many of the acres in the local park system are undeveloped (naturalized)?

11. Of all the acres managed in the local park system, what types of natural resources exist? Please list natural amenities (e.g., waterways/bodies, forest, open green space, wetlands):

Of the following resources, how many acres/miles do you utilize for recreation?

12. Forest
   Water bodies (e.g., ponds, lakes)
   Land Trails
   Water Trails

13. What percentage/miles of trails would you consider "accessible" as outlined in the Americans with Disabilities Act (ADA)?

Budgets:

14. What was the 2009 budget for your agency?

15. What was the total revenue earned by the local parks and recreation system in 2009?

16. Has your legally appropriated budget increased or decreased since the 2008 fiscal year?
19. What measures, in the last 5 years, have you taken to achieve ADA compliance?

Facilities Management:
In 2004, we asked local providers about their facilities. Please complete the following sections (A & B) so that we can track changes from the previous study.

Section A. Park and Recreation Facilities - Capital Projects and/or Renovation Projects

20. Do you currently have this facility in the local park system? (mark all that apply)
   A. Sports Complex
   B. Playground
   C. Boat Ramp/Canoe-Kayak Launch
   D. Wetland or Pond
   E. Picnic Area
   F. Prairie
   G. Campground
   H. Court Sport Area
   I. Field Sport Area
   J. Skate Park
   K. Dog Park
   L. Nature Center
   M. Swimming Pool
   N. Spray Park
   O. Aquatic Facility
   P. Community Center
   Q. Golf Courses
   R. New Park
   S. Other

21. Do you regularly provide programs with this facility? (mark all that apply)
   A. Sports Complex
   B. Playground
   C. Boat Ramp/Canoe-Kayak Launch
   D. Wetland or Pond
   E. Picnic Area
   F. Prairie
   G. Campground
   H. Court Sport Area
   I. Field Sport Area
   J. Skate Park
   K. Dog Park
   L. Nature Center
   M. Swimming Pool
   N. Spray Park
   O. Aquatic Facility
22. In 2004, was this a planned capital project? (mark all that apply)
A. Sports Complex
B. Playground
C. Boat Ramp/Canoe-Kayak Launch
D. Wetland or Pond
E. Picnic Area
F. Prairie
G. Campground
H. Court Sport Area
I. Field Sport Area
J. Skate Park
K. Dog Park
L. Nature Center
M. Swimming Pool
N. Spray Park
O. Aquatic Facility
P. Community Center
Q. Golf Courses
R. New Park
S. Other

23. Do you have a capital project planned for this in the next 5-10 years? (mark all that apply)
A. Sports Complex
B. Playground
C. Boat Ramp/Canoe-Kayak Launch
D. Wetland or Pond
E. Picnic Area
F. Prairie
G. Campground
H. Court Sport Area
I. Field Sport Area
J. Skate Park
K. Dog Park
L. Nature Center
M. Swimming Pool
N. Spray Park
O. Aquatic Facility
P. Community Center
Q. Golf Courses
R. New Park
S. Other

24. In the next 5 years do you plan to renovate or refurbish this facility? (mark all that apply)
A. Sports Complex
B. Playground
C. Boat Ramp/Canoe-Kayak Launch
D. Wetland or Pond
<table>
<thead>
<tr>
<th>LRP Survey</th>
<th><a href="http://inquisitor.bsu.edu/inpsi/paper">http://inquisitor.bsu.edu/inpsi/paper</a> Tes t.cgi</th>
</tr>
</thead>
<tbody>
<tr>
<td>E. Picnic Area</td>
<td></td>
</tr>
<tr>
<td>F. Prairie</td>
<td></td>
</tr>
<tr>
<td>G. Campground</td>
<td></td>
</tr>
<tr>
<td>H. Court Sport Area</td>
<td></td>
</tr>
<tr>
<td>I. Field Sport Area</td>
<td></td>
</tr>
<tr>
<td>J. Skate Park</td>
<td></td>
</tr>
<tr>
<td>K. Dog Park</td>
<td></td>
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<tr>
<td>L. Nature Center</td>
<td></td>
</tr>
<tr>
<td>M. Swimming Pool</td>
<td></td>
</tr>
<tr>
<td>N. Spray Park</td>
<td></td>
</tr>
<tr>
<td>O. Aquatic Facility</td>
<td></td>
</tr>
<tr>
<td>P. Community Center</td>
<td></td>
</tr>
<tr>
<td>Q. Golf Courses</td>
<td></td>
</tr>
<tr>
<td>R. New Park</td>
<td></td>
</tr>
<tr>
<td>S. Other</td>
<td></td>
</tr>
</tbody>
</table>

25. If "Other" facility was marked for the questions 20 to 25, what is the name of this facility?

<table>
<thead>
<tr>
<th>26. Do your capital or renovation projects include energy efficient/saving measures (green building design)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

**Section B. Trails - Capital Projects and/or Renovation Projects**

27. Do you currently have this facility in the local park system? *(mark all that apply)*

| A. Single Use Trail - Walking/Hiking |                                                                 |
| B. Single Use Trail - Bike |                                                                 |
| C. Single Use Trail - Other |                                                                 |
| D. Multi Use Trail - Hiking & Equine |                                                                 |
| E. Multi Use Trail - Off, Hiking & Equine: |                                                                 |
| F. Nature/Interpretive Trail |                                                                 |
| G. Connector Trails to Existing Trails |                                                                 |
| H. Bike-Pedestrian Trail (Paved) |                                                                 |
| I. Water Trails |                                                                 |
| J. Greenway |                                                                 |
| K. Other Trail |                                                                 |

28. Do you regularly provide programs with this facility? *(mark all that apply)*

| A. Single Use Trail - Walking/Hiking |                                                                 |
| B. Single Use Trail - Bike |                                                                 |
| C. Single Use Trail - Other |                                                                 |
| D. Multi Use Trail - Hiking & Equine |                                                                 |
| E. Multi Use Trail - Off, Hiking & Equine: |                                                                 |
| F. Nature/Interpretive Trail |                                                                 |
| G. Connector Trails to Existing Trails |                                                                 |
| H. Bike-Pedestrian Trail (Paved) |                                                                 |
| I. Water Trails |                                                                 |
| J. Greenway |                                                                 |
| K. Other Trail |                                                                 |
29. In 2004, was this a planned capital project? (mark all that apply)
   A. Single Use Trail - Walking/Hiking
   B. Single Use Trail - Bike
   C. Single Use Trail - Other
   D. Multi Use Trail - Hiking & Equine
   E. Multi Use Trail - OHV, Hiking & Equine:
   F. Nature/Interpretive Trail
   G. Connector Trails to Existing Trails
   H. Bike-Pedestrian Trail (Paved)
   I. Water Trails
   J. Greenway
   K. Other Trail

30. Do you have a capital project planned for this in the next 5-10 years? (mark all that apply)
   A. Single Use Trail - Walking/Hiking
   B. Single Use Trail - Bike
   C. Single Use Trail - Other
   D. Multi Use Trail - Hiking & Equine
   E. Multi Use Trail - OHV, Hiking & Equine:
   F. Nature/Interpretive Trail
   G. Connector Trails to Existing Trails
   H. Bike-Pedestrian Trail (Paved)
   I. Water Trails
   J. Greenway
   K. Other Trail

31. In the next 5 years do you plan to renovate or refurbish this facility? (mark all that apply)
   A. Single Use Trail - Walking/Hiking
   B. Single Use Trail - Bike
   C. Single Use Trail - Other
   D. Multi Use Trail - Hiking & Equine
   E. Multi Use Trail - OHV, Hiking & Equine:
   F. Nature/Interpretive Trail
   G. Connector Trails to Existing Trails
   H. Bike-Pedestrian Trail (Paved)
   I. Water Trails
   J. Greenway
   K. Other Trail

32. Is your trail accessible to persons with disabilities? (mark all that apply)
   A. Single Use Trail - Walking/Hiking
   B. Single Use Trail - Bike
   C. Single Use Trail - Other
   D. Multi Use Trail - Hiking & Equine
33. If "Other Trail" was marked for the questions 27 to 32, what is the trail type?

---

Community Members Served by Local Parks and Recreation:
Please indicate the groups you regularly provide local parks and recreation service or programs to, and how well do you think you serve their recreational needs?

<table>
<thead>
<tr>
<th>Target recreation programming?</th>
<th>Not at all</th>
<th>Sometimes</th>
<th>Almost</th>
<th>Always</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth between 1 and 8 years old</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth between 9 and 12 years old</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teenagers between 13 and 18 years old</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Young Single Adults (19 years or older)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Families with Children</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Older Adults: past Child Bearing Years</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior Citizens</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons with Disabilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial Minorities in the Community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethnic Groups in the Community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Income Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle Income Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High Income Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

35. Are any groups from Question 34 a priority or main focus for provision in your parks and recreation system in the next 5-10 years? Please explain:

---

Local Competition
Please indicate if the local park and recreation system has competition from other providers of recreational opportunities in the community. Please mark only the primary competition.

<table>
<thead>
<tr>
<th>Primary Type of Competition from</th>
<th>Revenue</th>
<th>Participation /Use</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neighborhood Parks in Subdivisions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private for Profit Providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Profit Provider (e.g. YMCA)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Systems providing Recreation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State Properties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal Properties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

37. If "other" was a competitor in question 36, What is the name of this competition?
38. Who else in your local community is providing recreation that may compete with the local parks and recreation system you manage?

**Common Issues Facing Local Recreation Providers:**
National research indicates 3 prevailing issues local providers face: a) funding, b) staffing and, c) land acquisition. We would like to know what different ways you have found to overcome these issues.

- **New** = Implemented within the past 5 years
- **Existing** = Continued from pre-5 years ago
- **Proposed** = Planned for the next 5 years but not implemented to date

### a) FUNDING
Please indicate any measures you have taken in the past 5 years or plan to implement in the future to address funding challenges with parks and recreation in your community. (Check all that apply)

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>39. New Funding</td>
<td></td>
</tr>
<tr>
<td>A. Worked with Park Foundation</td>
<td></td>
</tr>
<tr>
<td>B. Received Donations</td>
<td></td>
</tr>
<tr>
<td>C. Raised Fees</td>
<td></td>
</tr>
<tr>
<td>D. Levied Taxes</td>
<td></td>
</tr>
<tr>
<td>E. Applied for Grants</td>
<td></td>
</tr>
<tr>
<td>F. Pursued New Sponsorships</td>
<td></td>
</tr>
<tr>
<td>G. Engaged in Fundraising</td>
<td></td>
</tr>
<tr>
<td>H. Pursued Public-Private Partnership</td>
<td></td>
</tr>
<tr>
<td>I. Worked with &quot;Friends of&quot; Group</td>
<td></td>
</tr>
<tr>
<td>J. Approached Local Business for Funding</td>
<td></td>
</tr>
<tr>
<td>K. Sold Advertising Space to Local Businesses</td>
<td></td>
</tr>
<tr>
<td>L. Partnered with Educational Institutions</td>
<td></td>
</tr>
<tr>
<td>M. Pursued Non-Park Foundations</td>
<td></td>
</tr>
<tr>
<td>N. Pursued Community Foundation</td>
<td></td>
</tr>
<tr>
<td>O. Worked with Corporations for Sponsorships or Partnering</td>
<td></td>
</tr>
<tr>
<td>P. Closed Facilities</td>
<td></td>
</tr>
<tr>
<td>Q. Other</td>
<td></td>
</tr>
</tbody>
</table>

| 40. Existing Funding |
| A. Worked with Park Foundation | |
| B. Received Donations | |
| C. Raised Fees | |
| D. Levied Taxes | |
| E. Applied for Grants | |
| F. Pursued New Sponsorships | |
| G. Engaged in Fundraising | |
| H. Pursued Public-Private Partnership | |
| I. Worked with "Friends of" Group | |
| J. Approached Local Business for Funding | |
| K. Sold Advertising Space to Local Businesses | |
| L. Partnered with Educational Institutions | |
| M. Pursued Non-Park Foundations | |
| N. Pursued Community Foundation | |
| O. Worked with Corporations for Sponsorships or Partnering | |
| P. Closed Facilities | |
APPENDICES | The Indiana Statewide Outdoor Recreation Plan 2011-2015

IRP Survey

Q. Other

41. Proposed Funding
   A. Worked with Park Foundation
   B. Received Donations
   C. Raised Fees
   D. Leveled Taxes
   E. Applied for Grants
   F. Pursued New Sponsorships
   G. Engaged in Fundraising
   H. Pursued Public-Private Partnership
   I. Worked with "Friends of" Group
   J. Approached Small Local Business for Funding
   K. Sold Advertising Space to Local Businesses
   L. Partnered with Educational Institutions
   M. Pursued Non-Park Foundations
   N. Pursued Community Foundation
   O. Worked with Corporations for Sponsorships or Partnering
   P. Closed Facilities
   Q. Other

42. None taken/planned
   A. No action planned
   B. Other

43. If "Other" is applicable in questions 39 to 42, please specify:

b) STAFF (Questions 44 - 52)

44. What was the average number of full-time staff over the last 5 years?

45. How many full-time staff did you have in 2009?

46. What was the average number of part-time or seasonal staff over the last 5 years?

47. How many part-time or seasonal staff did you have in 2009?

New = Implemented within the past 5 years
Existing = Continued from pre-5 years ago
Proposed = Planned for the next 5 years but not implemented to date

Please indicate what you have done to address staffing issues in the past 5 years or plan to implement in the future. (Check all that apply.)
48. New
   A. Used/Increased Volunteers
   B. Worked Friend of Parks Groups
   C. Worked with Community Centers
   D. Worked with Youth Sports Leagues
   E. Partnering with Other Government Agencies
   F. Partnering with Local Educational Programs
   G. Partnering with Other Educational Programs
   H. Local Business Donations of People/Staff Time
   I. Local Business Donations of Equipment
   J. Other

49. Existing
   A. Used/Increased Volunteers
   B. Worked Friend of Parks Groups
   C. Worked with Community Centers
   D. Worked with Youth Sports Leagues
   E. Partnering with Other Government Agencies
   F. Partnering with Local Educational Programs
   G. Partnering with Other Educational Programs
   H. Local Business Donations of People/Staff Time
   I. Local Business Donations of Equipment
   J. Other

50. Proposed
   A. Used/Increased Volunteers
   B. Worked Friend of Parks Groups
   C. Worked with Community Centers
   D. Worked with Youth Sports Leagues
   E. Partnering with Other Government Agencies
   F. Partnering with Local Educational Programs
   G. Partnering with Other Educational Programs
   H. Local Business Donations of People/Staff Time
   I. Local Business Donations of Equipment
   J. Other

51. None taken/planned
   A. No action planned
   B. other

52. If "Other" is applicable, please specify:

   ____________________________

   c) LAND ACQUISITION (Questions 53 - 57)

   Please indicate any measures you have taken to address the need for land for parks and recreation in your community in the past 5 years or plan to implement in the future. (Check all that apply.)

   New = Implemented within the past 5 years
   Existing = Continued from pre-5 years ago
   Proposed = Planned for the next 5 years but not implemented to date
APPENDICES | The Indiana Statewide Outdoor Recreation Plan 2011-2015

LRP Survey

http://inquisitor.bsu.edu/inq inflate/papertest.cgi

53. New
   A. Land and Water Conservation Fund Grant used to purchase land
   B. Partner with local schools for public use of their land or recreational facilities
   C. Utility Corridors or Rights of Way
   D. Land Trust or other Nonprofit Landowners
   E. Conservation Easement with other Landowners
   F. Cooperation with Private Landowners
   G. Indiana Department of Natural Resources Grant programs
   H. Other

54. Existing
   A. Land and Water Conservation Fund Grant used to purchase land
   B. Partner with local schools for public use of their land or recreational facilities
   C. Utility Corridors or Rights of Way
   D. Land Trust or other Nonprofit Landowners
   E. Conservation Easement with other Landowners
   F. Cooperation with Private Landowners
   G. Indiana Department of Natural Resources Grant programs
   H. Other

55. Proposed
   A. Land and Water Conservation Fund Grant used to purchase land
   B. Partner with local schools for public use of their land or recreational facilities
   C. Utility Corridors or Rights of Way
   D. Land Trust or other Nonprofit Landowners
   E. Conservation Easement with other Landowners
   F. Cooperation with Private Landowners
   G. Indiana Department of Natural Resources Grant programs
   H. Other

56. None taken/planned
   A. No action planned
   B. Other

57. If "Other" is applicable, please specify:

---

Master Planning:

58. Does your local park and recreation system have a system-wide master plan? (If "No", skip to the last question in this section.)
   Yes  No
   If "Yes", what year was it last published?

How many years does it span?

If you have a master plan, what was the public input process for the writing of the master plan? (Mark all that apply)
   A. Focus Groups
   B. Public Survey
   C. Public Meetings
   D. Other

If "Other" is applicable in question above, please put name in the box:
Do you plan to develop a local parks and recreation master plan in the next 5-10 years?
A. Yes
B. No
C. Undecided

Demographics:
Please tell us about the people who work within the parks and recreation system. All data will be reported in aggregate only, so your responses will remain anonymous.

59. Please indicate if you would like to opt out of answering the demographic questions.
   Yes   No

How many people of the Local Parks and Recreation System fit the following categories?
Include hired staff and park board members.

60. What is the level of education attained?
   Some High School
   Graduated High School
   Some College
   College Graduate
   Graduate School

61. Race/Ethnicity
   White, Non-Hispanic
   Hispanic
   African-American
   Asian-American
   Native American
   Mixed Race
   Other

62. Number of male staff in Park System

63. Number of female staff in Park System
**APPENDICES | The Indiana Statewide Outdoor Recreation Plan 2011-2015**

**LRP Survey**

64. Number of staff with Disabilities

---

65. How many staff people in the park system fall in the following age groups?

- 15-20
- 21-30
- 31-40
- 41-50
- 51-60
- 61-70
- 71 or older

---

**Personal Data**

66. How long have you served in your current position?

- A. 0-1 years
- B. 1-5 years
- C. 6-10 years
- D. 11-15 years
- E. 16+ years

---

67. What is your level of education attained?

- A. Less than High School Degree
- B. Graduated High School Diploma
- C. Some College
- D. College Graduate
- E. Graduate School

---

68. Race/Ethnicity

- A. White, Non-Hispanic
- B. Hispanic
- C. African-American
- D. Asian-American
- E. Native American
- F. Mixed Race
- G. Other

---

69. Male or Female

- A. Male
- B. Female

---

70. Persons with Disability

- A. Yes, I have a Disability
- B. No, I do not have a Disability
71. What is your age? 
___

72. How many years have you worked in the Parks and Recreation profession? 
___

(883)