

## **Belle Isle Park Off-Site Survey**

You can also fill out this survey online! Follow this link:  
[http://www.surveymonkey.com/s/Belle\\_Isle](http://www.surveymonkey.com/s/Belle_Isle)

*This survey is being conducted by the Detroit Recreation Department and four private groups that support Belle Isle - the Friends of Belle Isle, the Belle Isle Botanical Society, the Friends of Belle Isle Aquarium and the Belle Isle Women's Committee. Your responses will help the City and its private supporters to set priorities for Belle Isle management and capital improvements. We want to know what you think!*

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### Questions

**1. In good weather, how often do you use Belle Isle Park? (Circle one)**

- |     |              |     |             |
|-----|--------------|-----|-------------|
| 1.1 | once a year  | 1.4 | everyday    |
| 1.2 | once a month | 1.5 | never       |
| 1.3 | once a week  | 1.6 | other _____ |

**2. If you answered "never," why not?** \_\_\_\_\_

\*If you answered "never," skip to question 16\*

**3. What days do you usually visit the park?**

- |     |                    |     |                       |
|-----|--------------------|-----|-----------------------|
| 3.1 | holidays only      | 3.4 | weekends only         |
| 3.2 | weekdays only      | 3.5 | weekdays and weekends |
| 3.3 | no particular days | 3.6 | other                 |

**4. When you visit the park, how long do you stay? Circle number.**

- |     |                |     |                 |
|-----|----------------|-----|-----------------|
| 4.1 | 1 hour or less | 4.3 | 3 to 6 hours    |
| 4.2 | 1 to 3 hours   | 4.4 | 6 hours or more |

**5. When you visit Belle Isle Park, how do you get there? Circle one.**

- |      |        |     |         |
|------|--------|-----|---------|
| 5.1. | by car | 5.3 | by bus  |
| 5.2  | I walk | 5.4 | by bike |

**6. When you visit Belle Isle Park, how many people do you bring with you? \_\_\_\_\_ (number)**

**7. Please describe who comes to Belle Isle Park with you.**

- 7.1 alone
- 7.2 friends
- 7.3 family/spouse
- 7.4 organized group
- 7.5 other \_\_\_\_\_

**8. Here is a list of possible park activities that you might engage in at the Park. Please check which ones you have done, or which ones you think you might like to do the next time you visit.**

- 8.1 Picnic
- 8.2 Exercise
- 8.3 Use Athletic Fields
- 8.4 Use the Beach
- 8.5 Use Kids Row
- 8.6 Games (ex. Frisbee)
- 8.7 Kayak/Canoe
- 8.8 Swim/Play in the water
- 8.9 Stroll/walk
- 8.10 Run/jog
- 8.11 Watch sports  
(list \_\_\_\_\_)
- 8.12 Attend a special event  
(list \_\_\_\_\_)
- 8.13 Socialize
- 8.14 Fish
- 8.15 Fly kites
- 8.16 Visit Yacht Club
- 8.17 Visit Nature Zoo
- 8.18 Visit Dossin Museum
- 8.19 Visit Conservatory
- 8.20 Use Blue Heron Lagoon  
Nature trail
- 8.21 Cruise in your car
- 8.22 Barbeque
- 8.23 Walk your dog
- 8.24 Sunbathe
- 8.25 Use the waterslide
- 8.26 Use the giant slide
- 8.27 Other \_\_\_\_\_

**9. Here is a list of facilities in the park. How many times during the past year have you visited each of these? Check one column for each facility.**

	Once a YEAR	Once a MONTH	Once a WEEK	Almost EVERYDAY	Never	I didn't know it existed.
1. Sunset Point						
2. Scott Fountain						
3. Picnic Shelters						
4. Conservatory/Gardens						
5. Dossin Museum						
6. Kid's Row- Playscape						
7. Athletic Fields						
8. Beach/Bathhouse						
9. Detroit Yacht Club						
10. Driving Range						
11. Nature Center						
12. Fishing Piers						
13. Blue Heron Lagoon (nature trail)						
14. Forest Nature Trails						
15. Other						

10. Please indicate whether you feel there are “too many,” “the right amount,” or “not enough” of each of the following things in the park.

	Too many	Right amount	Not enough	Don't know
Places to buy food				
Benches				
Drinking Fountains				
Restrooms				
Waste Receptacles				
Signs and Information				
Things to do				
Play areas for children				
Park security presence				
Parking Areas				
Entrances to the Park				
Shady Areas				
Picnic Shelters				

11. How much of a priority do you think the following improvements to Belle Isle should be given?

	High	Moderate	Low	No Opinion
<b>Preserve, restore and improve...</b>				
(1) Signage to make it easier to find your way.....	[ ]	[ ]	[ ]	[ ]
(2) Fishing piers.....	[ ]	[ ]	[ ]	[ ]
(3) The Flynn Pavilion.....	[ ]	[ ]	[ ]	[ ]
(4) Picnic shelters.....	[ ]	[ ]	[ ]	[ ]
(5) The Band shell.....	[ ]	[ ]	[ ]	[ ]
(6) The Carillon Tower.....	[ ]	[ ]	[ ]	[ ]
(7) The White House (park staff H.Q.).....	[ ]	[ ]	[ ]	[ ]
(8) The former stables (the maintenance buildings behind the white house).....	[ ]	[ ]	[ ]	[ ]
(9) The Conservatory.....	[ ]	[ ]	[ ]	[ ]
(10) Gardens and plantings, and trees.....	[ ]	[ ]	[ ]	[ ]
(11) Nature Trails.....	[ ]	[ ]	[ ]	[ ]
(12) The Forest.....	[ ]	[ ]	[ ]	[ ]
(13) The Casino.....	[ ]	[ ]	[ ]	[ ]
<b>Re-open...</b>				
(14) The Aquarium.....	[ ]	[ ]	[ ]	[ ]
(15) The Golf Course.....	[ ]	[ ]	[ ]	[ ]
(16) Canals for canoeing/kayaking.....	[ ]	[ ]	[ ]	[ ]
(17) The Boat Club for public use.....	[ ]	[ ]	[ ]	[ ]
<b>Create new...</b>				
(18) Create a Physical Fitness course.....	[ ]	[ ]	[ ]	[ ]
(19) Create the Radio Control Courses.....	[ ]	[ ]	[ ]	[ ]
<b>Other</b>				
(20).....	[ ]	[ ]	[ ]	[ ]

12. We'd also like to know how YOU feel about certain aspects of the park, such as the condition of the facilities, so that the park can be improved. Please indicate whether you feel each of the following is good, average, or poor in this park.

	Good	Average	Poor	Don't know
Security				
Cleanliness				
Noise levels				
Landscaping				
Quality of Food				
Food Selection				
Maintenance				
Lighting at night				

13. What is the most important improvement that should be made to the park?

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14. What is the best thing about this park? Please describe.

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15. What is the worst thing about this park? Please describe.

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16. How do you think Belle Isle Park should be funded and supported?

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*Past research has shown that people of different ages and sexes view things differently. Please tell us a little bit about yourself. This information is, of course, anonymous and confidential.*

17. **Please circle your gender:**

17.1 Female                      17.2 Male

18. **What year were you born?** \_\_\_\_\_

19. **What is your race/ethnicity? You may select more than one.**

- |      |                                   |      |  |
|------|-----------------------------------|------|--|
| 19.1 | American Indian or Alaskan Native | 19.5 | Native Hawaiian/Other Pacific Islander |
| 19.2 | Asian                             | 19.6 | White                                  |
| 19.3 | Black or African American         | 19.7 | Middle Eastern descent                 |
| 19.4 | Hispanic or Latino                | 19.8 | Other _____                            |

20. **What language(s) do you speak in your home?** \_\_\_\_\_

21. **What is the zip-code of your residence?** \_\_\_\_\_

22. **How did you find out about this survey?** \_\_\_\_\_

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OPTIONAL:

23. If you would like to **get involved or volunteer at Belle Isle Park** , may we contact you in the future? If so, please give us your name and contact (address, telephone number, and/or email) in the space below.

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