

Navy YSF Youth/Teen Interest Survey

Adapt the survey template as necessary to your local programming needs.

1. Do you live on base or off base?

- On base
- Off base

2. If you live off base, what is the name of the town you live in?

3. How old are you?

Age:

4. Please check at least five (5) sports that you like the most:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Handball | <input type="checkbox"/> Track & Field |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Kickball | <input type="checkbox"/> Ultimate Frisbee |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Martial Arts | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Dodge Ball | <input type="checkbox"/> Soccer | <input type="checkbox"/> Water Polo |
| <input type="checkbox"/> Flag Football | <input type="checkbox"/> Softball | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Swimming | |
| <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Tennis | |

Are you interested in any other sports?

5. Please check at least five (5) fitness activities that you like to do:

- | | | |
|--|---|--|
| <input type="checkbox"/> BMX Biking | <input type="checkbox"/> Fun Runs/Walks | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Mountain Biking | <input type="checkbox"/> Ice Skating | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Indoor Climbing Wall | <input type="checkbox"/> Water Aerobics |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Inline Skating | <input type="checkbox"/> Weight Training |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Pilates | <input type="checkbox"/> Yoga |
| <input type="checkbox"/> Family Fitness Programs | <input type="checkbox"/> Skateboarding | <input type="checkbox"/> Zumba |

Are you interested in any other fitness activities?

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6. Please check at least three (3) outdoor recreation activities that you would like to do:

- | | | |
|--|--|--|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Mountain Biking | <input type="checkbox"/> Scuba Diving/Snorkeling |
| <input type="checkbox"/> Backpacking/Camping | <input type="checkbox"/> Nature Programs | <input type="checkbox"/> Snowshoeing |
| <input type="checkbox"/> Canoeing/Kayaking | <input type="checkbox"/> Paddleboarding | <input type="checkbox"/> Skiing/Snowboarding |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Paintball | <input type="checkbox"/> Surfing |
| <input type="checkbox"/> Geocaching | <input type="checkbox"/> Rock Climbing | <input type="checkbox"/> White Water Rafting |
| <input type="checkbox"/> Hiking/Nature Walks | <input type="checkbox"/> Ropes Courses | |
| <input type="checkbox"/> Horseback Riding | <input type="checkbox"/> Sailing | |

Are you interested in any other outdoor recreation activities?

7. Please check at least three (3) health and nutrition activities that you would like to do:

- | | | |
|--|--|--|
| <input type="checkbox"/> Cooking Classes | <input type="checkbox"/> Learning about nutrition topics | <input type="checkbox"/> Visits to local farmer's markets |
| <input type="checkbox"/> Cook-Offs | <input type="checkbox"/> Making healthy recipes | <input type="checkbox"/> Learning about health and safety topics |
| <input type="checkbox"/> Growing flower gardens | <input type="checkbox"/> Recipe sharing | |
| <input type="checkbox"/> Growing vegetable gardens | <input type="checkbox"/> Visits to local farms | |

Are you interested in any other health and nutrition activities?

8. What five (5) things most help you or make you want to join in an activity?

- | | | |
|---|---|---|
| <input type="checkbox"/> Located near where I live | <input type="checkbox"/> Someone to teach me how | <input type="checkbox"/> I like the coach |
| <input type="checkbox"/> Located on base | <input type="checkbox"/> We have money for me to go | <input type="checkbox"/> I have fun playing |
| <input type="checkbox"/> I have a ride to get there | <input type="checkbox"/> I have the skills | <input type="checkbox"/> I like winning |
| <input type="checkbox"/> My family is interested | <input type="checkbox"/> I am confident | |
| <input type="checkbox"/> My friends are doing it | <input type="checkbox"/> There is a sport I like | |

Is there anything else that makes you want to participate in a sport or recreation activity that is not listed above?

9. Would you be interested in participating in on-base activities if your friends could join in, for example, meet at the beach to go surfing or meet at the bowling alley to go bowling?

- Yes
 No

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10. Are there any sports or recreation activities that you haven't seen listed that you would like to participate in?

11. How do you find out about youth/teen sports and recreation activities that are offered on base?

- | | |
|--|---|
| <input type="checkbox"/> Activities Calendar | <input type="checkbox"/> At school |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> From friends |
| <input type="checkbox"/> Flyers on base | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> At the Youth Center | <input type="checkbox"/> I didn't know activities are offered on base |
| <input type="checkbox"/> At the Teen Center | |

Other (please specify)