



Your YMCA Youth Sports Program Experience Survey

If asked, how likely are you to recommend the YMCA Youth Sports Program to a friend or neighbor?

- 10 Definitely would
- 9
- 8
- 7
- 6
- 5
- 4
- 3
- 2
- 1
- 0 Definitely would not

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How would you rate this program on each of the following:

	Excellent	Good	Fair	Poor	NA / Don't Know
Overall organization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall quality of staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication between staff and parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationships between you and the staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationships between your child and the staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Connecting you to other parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helping your family lead a more balanced and healthy lifestyle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Serving healthy snacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A fun, enjoyable experience for your child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A safe and secure environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Value for the money	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Living up to your expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving communications between you and your child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providing positive adult/staff role models	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall quality of volunteer coach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication between volunteer coach and families	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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How strongly do you agree or disagree that this program has helped your child?

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	NA / Don't Know
Demonstrate caring, honesty, respect, and responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Volunteer and help others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do better in school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gain new knowledge, skills, and abilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Become more physically active	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eat more fruits and vegetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Build confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Be open to new experiences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Make new friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stay away from drugs and alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pursue an interest they are passionate about	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discover what he/she can achieve	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feel a sense of belonging to a team/this program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improve his/her sports skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enjoy the game more	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stand up to peer pressure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have a greater self-control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Value differences in others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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To what extent do you believe your child's participation in this program is making a real positive impact in his/her life?

- 10 Definitely Is Making a Real Positive Impact
- 9
- 8
- 7
- 6
- 5
- 4
- 3
- 2
- 1
- 0 Definitely IS NOT Making a Real Positive Impact

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If you answered 0-6 above, please explain why you are less than sure this program is making a real positive impact in your child's life. What would this program have to accomplish for you to have answered this question with a 9 or 10?

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How strongly do you agree with each of the following?

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
The Y is an important community resource for nurturing the potential of every child.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Y is an important resource for improving the health and well-being of the community.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Y provides people the opportunity to give back and support their neighbors.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Y helps strengthen the community.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Y is helping my child discover who he/she is.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
I feel like my child and I really belong at the Y.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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How often does your child participate in all Y activities (including this program)?

- Less than once per week
- 1-2 days per week
- 3-4 days per week
- 5 days a week

How long has your child been participating in this specific program at the Y?

- Less than 1 year
- 1 year
- 2 years
- 3-5 years
- 6-10 years
- Longer than 10 years

Does your child participate in other Y activities?

- Yes
- No

In an average week, how many hours is your child engaged in Y activities?

- Less than 1 hour
- 1-2 hours
- 3-4 hours
- 5-10 hours
- More than 10 hours