



September 2014

### **Tell us your Ideas for Recreation & Parks in the Township of Puslinch!**

The Township of Puslinch is undertaking a **Recreation & Parks Master Plan** to guide the development and delivery of community facilities and programs for the next 10 years and beyond.

Your organization's input is very important to this initiative. We have prepared a brief questionnaire for you to complete on behalf of your group (see attached). **We will not know what your organization's current and future needs are unless we hear from you!**

We ask that you complete the questionnaire and return it to the Township on or before **October \_\_, 2014** by mail, fax, email, or directly to the Township's Administrative Office. If you would prefer a digital copy that you can complete on your computer, please contact me with your email address.

In addition, there will be other opportunities for your organization to get involved in the Master Plan process. **A Community Launch Event is scheduled for \_\_\_\_\_. Details ...**

If you are no longer the primary representative for your organization, we kindly ask that you contact us so that we can update our records.

Thank you for your time and participation.

Yours Truly,  
**Donna Tremblay**

Deputy Clerk  
Township of Puslinch  
7404 Wellington Rd. 34, Guelph, ON N1H 6H9

Phone: 519-763-1226 ext. 207  
Fax: 519-763-5846  
E-mail: dtremblay@puslinch.ca

**You are also invited to complete our General Community Survey (which is different from the attached questionnaire), located online at <http://www.surveymonkey.com/s/PUSLINCH>. Tell your friends!**

**Group Information**

Group Name: \_\_\_\_\_

Group Representative & Position: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Group Website: \_\_\_\_\_ Year Group Established: \_\_\_\_\_

Primary communities served (e.g., Aberfoyle, Morriston, entire Township, Guelph, etc.):

\_\_\_\_\_

Number of Participants:

Year	Number of Active Participants	Number on Waiting List	Primary Age Range of Participants	Percent that live in the Township of Puslinch
2014				
2013				
2012				

**Mandate/Purpose**

1. Please tell us about your group's **mandate** and your group's **primary activities and programs**.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Does your group have any plans to **reduce** or **expand** your scope of **programming or services** in the next 2-3 years? (select one only)

- Reduce     Expand     No Change     Not Applicable

If '**Expand**': Please explain your group's **ability to accommodate** additional interest in your programs and any **factors** that could limit your capacity to do so. If '**Reduce**': What are the reasons for this?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Facility Usage & Needs**

3. What indoor/outdoor recreation **facilities** or **parks in the Township of Puslinch** does your group use (regardless of ownership) and what, if anything, needs to be **improved** in order to better meet your group's needs?

Park/Facility Name	Frequency of Use	What Needs Improvement?

4. Does your organization regularly use parks or facilities in **other communities**?

Yes    No    Don't Know    Not Applicable

If **'Yes'**, please identify what parks and facilities your organization regularly uses in **other communities** and if you foresee any changes to how you use these facilities.

Park/Facility Name	What Needs Improvement?

5. Would your organization be willing to **contribute financially** to the development or operation of any **new or expanded facilities**?

Yes    No    Don't Know

If **'Yes'**, which of the following methods would your organization be most likely to pursue? Please check all that apply.

Fundraising    Partnerships/Direct contributions  
 Payment of higher rental fees    Other \_\_\_\_\_

6. Does your organization presently require **additional** access to **existing** parks or facilities?

Yes    No    Don't Know    Not Applicable

If **'Yes'**, how many more hours are needed, when and where are they needed, and for what purposes?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Will your group require access to any **new** parks or recreation **facilities** in the next five to ten years?

- Yes (complete the table below)     No     Don't Know     Not Applicable

Facility type	Anticipated size/design requirements	Reason for new access requirements

8. Does your organization require **additional support** from the Township?

- Yes     No     Don't Know     Not Applicable

If **'Yes'**, what type of support is needed and **how** can the Township better **support** the services that your group offers?

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9. What can your organization, the Township, and/or the community do to make recreation and park services more **inclusive** to those who are unable to participate (e.g., those with disabilities, lower income households, certain age groups, etc.)?

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10. Overall, what is the **most pressing need or concern** currently facing your group? Please attach any further comments on additional pages.

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Thank you for your feedback!  
 Please return to Donna Tremblay, Deputy Clerk, Township of Puslinch by:  
**October \_\_, 2014**  
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