

Armstrong Trail Survey

1. Your city, state and zip code? _____
2. What is your age group?
 - a. 15 or under
 - b. 16 – 20
 - c. 21 – 25
 - d. 26 – 35
 - e. 36 – 45
 - f. 46 – 55
 - g. 56 – 65
 - h. 66 or older
3. What is your gender
 - a. Female
 - b. Male
4. How did you become aware of the trail? *(circle all that apply)*
 - a. Word of Mouth
 - b. Signage
 - c. Newspaper
 - d. Tourist Bureau
 - e. Internet/what site: _____
 - f. Other: _____
5. How often do you use the trail?
 - a. Daily
 - b. 3 to 5 times a week
 - c. 1 to 2 times a week
 - d. 1 time a week
 - e. More than once a month
 - f. Once a month
 - g. Few times a year
 - h. First time
6. When do you use the Trail?
 - a. Weekdays
 - b. Weekends
 - c. Both
7. Please rate when you use the trail the most? *(4 being most, 1 being least)*

Summer	
Fall	
Winter	
Spring	
8. How much time do you spend on the trail during each visit?
 - a. Less than 30 minutes
 - b. 30 minutes – 1 hour
 - c. 1- 2 hours
 - d. More than 2 hours
9. What is your **primary** activity on the Trail? *(Circle only one)*
 - a. Walking/Hiking
 - b. Biking
 - c. Jogging/Running
 - d. Other: _____
10. What other activities do you participate in on the trail? *(Circle all that apply)*
 - a. Walking/Hiking
 - b. Biking
 - c. Jogging/Running
 - d. Other: _____
11. What is your **primary** use of the trail? *(Circle only one)*
 - a. Recreation
 - b. Health/exercise
 - c. Commuting/transportation
 - d. Volunteer/community service
 - e. Other: _____

12. What are your other uses of the trail? (Circle all that apply)

- a. Recreation
- b. Health/exercise
- c. Commuting/transportation
- d. Volunteer/community service
- e. Other: _____

13. Has the Trail "influenced" you to purchase any of the following: (circle all that apply)

- a. Bike
- b. Clothing
- c. Footwear
- d. Bike supplies/equipment
- e. Auto accessories (example: bike rack)
- d. Nothing

14. Approximately how much did you spend on the above items in the past year? \$ _____

15. On your most recent trip did you purchase any of the following items?

- a. Beverages
- b. Snack food
- c. Sandwiches
- d. Eat at a local restaurant/what restaurant: _____

16. Do your visits to the trail involve overnight stay at one of the following?

- a. Motel/Hotel
- b. Bed and Breakfast
- c. Friends/relatives
- d. Campground
- e. Other: _____
- f. No

17. How many nights did you stay for your trail visit? _____

18. How much did you spend on overnight accommodations? \$ _____

19. On your trail visits, how would you rate the maintenance of the trail?

- a. Excellent
- b. Good
- c. Fair
- d. Poor

20. What improvements are needed in trail maintenance? _____

21. Please prioritize the following possible projects. (1 being least important, 10 being most important)

- a. Armstrong Trail becomes part of an alliance to make the Lake Erie to Pittsburgh trail connection.
- b. Armstrong Trail coexists with projected rebuilding of the railroad from Kiski River to Crooked Creek.
- c. Amenities added such as signs, benches, bike racks, and restrooms.
- d. Restoration of the East Brady Train Tunnel.
- e. Project to revitalize Trail Towns and business districts.
- f. Advertising and marketing the Armstrong Trail.
- g. Making the connections of unfinished sections.
- h. Trail head and parking improvements Explain: _____
- i. Working with cooperative organizations to improve ATV relations.
- j. Improve river access Explain: _____

22. Optional

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Would you like to be added to our Rails to Trails Email List? YES NO