

6. Several **INDOOR** recreation facilities and amenities that could be included in a **NEW** indoor community center are listed below. For each one, please indicate if you or others in your household have a need for the item by circling "YES" or "NO." If you or others have a need, please indicate how well your needs for the item are being met.

| Type of Facility or Amenity | Do You Have a Need for this Facility or Amenity? | | If You Have a Need, How Well Are Your Needs Currently Being Met? | | | |
|---|--|----|--|------------|------------|---------|
| | Yes | No | Fully Met | Mostly Met | Partly Met | Not Met |
| 1. Arts and crafts areas | Yes | No | 4 | 3 | 2 | 1 |
| 2. Café/coffee shop | Yes | No | 4 | 3 | 2 | 1 |
| 3. Climbing/bouldering wall | Yes | No | 4 | 3 | 2 | 1 |
| 4. Drop-in day care facility | Yes | No | 4 | 3 | 2 | 1 |
| 5. Elevated running/walking/jogging track | Yes | No | 4 | 3 | 2 | 1 |
| 6. Exercise studio | Yes | No | 4 | 3 | 2 | 1 |
| 7. Fitness equipment area | Yes | No | 4 | 3 | 2 | 1 |
| 8. Gymnasium (courts) | Yes | No | 4 | 3 | 2 | 1 |
| 9. Indoor aquatics facilities | Yes | No | 4 | 3 | 2 | 1 |
| 10. Indoor archery range | Yes | No | 4 | 3 | 2 | 1 |
| 11. Indoor playground area | Yes | No | 4 | 3 | 2 | 1 |
| 12. Indoor turf fieldhouse | Yes | No | 4 | 3 | 2 | 1 |
| 13. Kitchen space (classes/catering/rentable) | Yes | No | 4 | 3 | 2 | 1 |
| 14. Locker rooms | Yes | No | 4 | 3 | 2 | 1 |
| 15. Multipurpose classrooms/meeting space | Yes | No | 4 | 3 | 2 | 1 |
| 16. Outdoor aquatics facilities | Yes | No | 4 | 3 | 2 | 1 |
| 17. Racquetball/court sport space | Yes | No | 4 | 3 | 2 | 1 |
| 18. Senior activity spaces | Yes | No | 4 | 3 | 2 | 1 |
| 19. Theatre or musical production space | Yes | No | 4 | 3 | 2 | 1 |
| 20. Youth activity spaces | Yes | No | 4 | 3 | 2 | 1 |
| 21. Other: _____ | Yes | No | 4 | 3 | 2 | 1 |

7. Which **FOUR** of the items listed in Question 6 do you think are **MOST IMPORTANT** to include in the design of a **NEW** indoor community center for **Shawnee**? (Write your top 4 choices below using the numbers from the list in Question 6; if you do not think any of these are needed, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

8. Which **FOUR** of the items listed in Question 6 would you and the members of your household **USE MOST OFTEN** if they were developed in a **NEW** indoor community center? (Write your top 4 choices below using the numbers from the list in Question 6; if you do not think you would use any of these, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

9. Several INDOOR programs and activities that could be a part of a **NEW** indoor community center are listed below. For each one, please indicate if you or others in your household have a need for the item by circling "YES" or "NO." If you or others have a need, please indicate how well your needs for the item are being met.

| Type of Program or Activity | Do You Have a Need for this Program or Activity? | | If You Have a Need, How Well Are Your Needs Currently Being Met? | | | |
|--|--|----|--|------------|------------|---------|
| | Yes | No | Fully Met | Mostly Met | Partly Met | Not Met |
| 1. Active Senior Programming (i.e. Silver Sneakers) | Yes | No | 4 | 3 | 2 | 1 |
| 2. Art, Dance, Performing Arts Programs | Yes | No | 4 | 3 | 2 | 1 |
| 3. Birthday Parties | Yes | No | 4 | 3 | 2 | 1 |
| 4. Computer and technology programs (coding and programming/educational) | Yes | No | 4 | 3 | 2 | 1 |
| 5. Cooking Classes | Yes | No | 4 | 3 | 2 | 1 |
| 6. Daycare | Yes | No | 4 | 3 | 2 | 1 |
| 7. Drop in Summer Playground Activities | Yes | No | 4 | 3 | 2 | 1 |
| 8. Early Childhood Programming | Yes | No | 4 | 3 | 2 | 1 |
| 9. Environmental Education Classes | Yes | No | 4 | 3 | 2 | 1 |
| 10. Farmers Market | Yes | No | 4 | 3 | 2 | 1 |
| 11. Fitness and Wellness Programs | Yes | No | 4 | 3 | 2 | 1 |
| 12. Gymnastics | Yes | No | 4 | 3 | 2 | 1 |
| 13. Indoor court sports (volleyball, basketball, badminton) | Yes | No | 4 | 3 | 2 | 1 |
| 14. Indoor turf sports (soccer, baseball, lacrosse) | Yes | No | 4 | 3 | 2 | 1 |
| 15. Personal Training Sessions | Yes | No | 4 | 3 | 2 | 1 |
| 16. Pickleball | Yes | No | 4 | 3 | 2 | 1 |
| 17. Running/Walking Clubs and Programs | Yes | No | 4 | 3 | 2 | 1 |
| 18. Special Events | Yes | No | 4 | 3 | 2 | 1 |
| 19. Tap and Ballroom Dance Lessons | Yes | No | 4 | 3 | 2 | 1 |
| 20. Teen Programs | Yes | No | 4 | 3 | 2 | 1 |
| 21. Tennis Lessons | Yes | No | 4 | 3 | 2 | 1 |
| 22. Youth Summer Camp Programs | Yes | No | 4 | 3 | 2 | 1 |
| 23. Other: _____ | Yes | No | 4 | 3 | 2 | 1 |

10. Which **FOUR** of the items listed in Question 9 do you think are **MOST IMPORTANT** to include in the design of a **NEW** indoor community center for Shawnee? (Write your top 4 choices below using the numbers from the list in Question 9; if you do not think any of these are needed, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

11. Which **FOUR** of the items listed in Question 9 would you and the members of your household **PARTICIPATE IN MOST OFTEN** if they were developed as a part of a **NEW** indoor community center? (Write your top 4 choices below using the numbers from the list in Question 9; if you do not think you would use any of these, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

12. If the community supports an aquatic feature to be included in the proposed community center there are several aquatic features and programs that could be included. For each of the potential amenities and programs listed below, please indicate if you or others in your household have a need for the item by circling "YES" or "NO." If you or others have a need, please indicate how well your needs for the item are being met.

| Type of Aquatic Amenity or Program | Do You Have a Need for this Amenity or Program? | | If You Have a Need, How Well Are Your Needs Currently Being Met? | | | |
|--|---|----|--|------------|------------|---------|
| | | | Fully Met | Mostly Met | Partly Met | Not Met |
| 1. Birthday parties | Yes | No | 4 | 3 | 2 | 1 |
| 2. Deck Space for Lounge Seating/Observation | Yes | No | 4 | 3 | 2 | 1 |
| 3. Diving boards | Yes | No | 4 | 3 | 2 | 1 |
| 4. FlowRider® (surf pool) | Yes | No | 4 | 3 | 2 | 1 |
| 5. Kayaking Lessons | Yes | No | 4 | 3 | 2 | 1 |
| 6. Lazy River | Yes | No | 4 | 3 | 2 | 1 |
| 7. Multi-Lane Lap Pool (6 to 10 lanes, 25 yards) | Yes | No | 4 | 3 | 2 | 1 |
| 8. Ninja Warrior obstacle course | Yes | No | 4 | 3 | 2 | 1 |
| 9. Recreational Swimming Area | Yes | No | 4 | 3 | 2 | 1 |
| 10. Sauna and hot tub | Yes | No | 4 | 3 | 2 | 1 |
| 11. SCUBA Lessons | Yes | No | 4 | 3 | 2 | 1 |
| 12. Sprayground | Yes | No | 4 | 3 | 2 | 1 |
| 13. Swim Lessons | Yes | No | 4 | 3 | 2 | 1 |
| 14. Therapy Pool | Yes | No | 4 | 3 | 2 | 1 |
| 15. Warm Water Pool with Zero Depth Entry | Yes | No | 4 | 3 | 2 | 1 |
| 16. Water Aerobics and Water Exercise Programs | Yes | No | 4 | 3 | 2 | 1 |
| 17. Water Slides | Yes | No | 4 | 3 | 2 | 1 |
| 18. Other: _____ | Yes | No | 4 | 3 | 2 | 1 |

13. Which FOUR of the items listed in Question 12 do you think are MOST IMPORTANT to include in the design of a NEW indoor community center for Shawnee? (Write your top 4 choices below using the numbers from the list in Question 12; if you do not think any of these are needed, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

14. Which FOUR of the items listed in Question 12 would you and the members of your household USE MOST OFTEN if they were developed as a part of a NEW indoor community center? (Write your top 4 choices below using the numbers from the list in Question 12; if you do not think you would use any of these, circle "NONE.")

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

15. Please check ALL of the following nontraditional services (i.e. not recreation or sport specific) you would like to see incorporated into the proposed community center knowing the City of Shawnee would have to collaborate with partners in the community to offer these services. (Select ONLY THREE items)

- | | |
|-----------------------------|---------------------------------------|
| ____(01) Cardiac rehab | ____(06) Automotive repair training |
| ____(02) Urgent care clinic | ____(07) Woodworking classes |
| ____(03) Workplace training | ____(08) Continuing education classes |
| ____(04) Computer training | ____(09) Trades training |
| ____(05) Culinary training | ____(10) Other: _____ |

16. From the following list, please select the THREE ways you prefer to pay to use the indoor community center if it had the amenities, programs, and aquatic features you and members of your household most preferred. (Select ONLY THREE items)
- ___(1) Daily admission fee
 - ___(2) 15-day admission package (at a reduced price)
 - ___(3) Monthly (unlimited access for one month)
 - ___(4) Yearly individual admission (unlimited access for one year)
 - ___(5) Yearly family admission (unlimited access for one year)
 - ___(6) None, would not use the facility

Costs to build a new indoor community center, comparable to neighboring cities, will need to be debt financed, (i.e. the City of Shawnee will borrow the funds needed to build the facility). The payments for this debt agreement most likely will be made through an increase to the yearly property taxes on all homes in the City of Shawnee. The table below details the current City property taxes on homes in Shawnee, proposed property taxes, and the overall increase homeowners would expect to see if taxes were increased through a voter referendum.

| Home Value | Current Monthly | Proposed Monthly | Monthly Increase |
|------------|-----------------|------------------|------------------|
| \$150,000 | \$38.26 | \$45.45 | \$7.19 |
| \$200,000 | \$51.01 | \$60.59 | \$9.58 |
| \$250,000 | \$63.76 | \$75.74 | \$11.98 |
| \$300,000 | \$76.52 | \$90.89 | \$14.38 |

17. Knowing that voting “yes” would result in an increase to your yearly City property tax, how would you vote on a proposed Mill Levy increase that would allow the City to build and maintain a new indoor community center with the amenities and programs that you indicated were most important to your household.
- ___(1) Vote in favor
 - ___(2) Might vote in favor
 - ___(3) Not sure (answer Q17a.)
 - ___(4) Vote against (answer Q17a)
- 17a. If you answered “NOT SURE” or “VOTE AGAINST” to Question 17 please indicate why you answered this way.
- ___(1) I need more information before I can answer
 - ___(2) I would not use a new indoor community center
 - ___(3) I believe the City currently has sufficient indoor recreation opportunities
 - ___(4) I believe those who plan on using the community center should bear the burden of paying for the facility
 - ___(5) I do not support any increase to taxes
 - ___(6) Other: _____

DEMOGRAPHICS

18. What is your age? _____ years
19. Counting yourself, how many people in your household are:
- | | | | |
|------------------|-----------------|-----------------|-----------------|
| Under age 5: ___ | Ages 15-19: ___ | Ages 35-44: ___ | Ages 65-74: ___ |
| Ages 5-9: ___ | Ages 20-24: ___ | Ages 45-54: ___ | Ages 75+: ___ |
| Ages 10-14: ___ | Ages 25-34: ___ | Ages 55-64: ___ | |
20. Approximately how many years have you lived in the City of Shawnee? _____ years
21. What is your total household income?
- ___(1) Under \$35,000
 - ___(2) \$35,000 to \$59,999
 - ___(3) \$60,000 to \$99,999
 - ___(4) \$100,000 to \$149,999
 - ___(5) \$150,000 or more
22. Do you plan to vote in the upcoming 2018 elections? ___(1) Yes ___(2) No
23. What is your gender? ___(1) Male ___(2) Female

24. Would you be interested in learning more about the proposed indoor recreation facility and focus group opportunities by becoming a part of Shawnee's Survey Research Panel? ____ (1) Yes (answer Q24a) ____ (2) No (end survey)

24a. If YES: please provide your contact information below. Providing your contact information does not automatically sign you up for the Research Panel. ETC Institute will first provide interested residents with additional information about the Panel and then residents can decide whether they would like to participate.

Your Name: _____ Phone: _____

Your Email: _____

This concludes the survey. Thank you for your time.

Please return your completed survey in the enclosed return-reply envelope addressed to:

725 W. Frontier Circle, Olathe, KS 66061

Your response will remain Completely Confidential. The address information on the sticker to the right will ONLY be used to help identify areas with special interests. Thank you.