

In Person Interviews

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1. Have you heard about the Farmers Market before this survey? (If no, please skip to Question #6)

- Yes
 No

2. How did you hear about the Farmers Market? (Please check all that apply)

- In the newspaper
 Radio
 On a banner in town
 Advertisement in a bus
 Family or friend
 Other

3. How often did you go to the Farmers Market last summer?

- Every week
 Every other week
 Once a month
 A few times
 Once
 Never
 Other

4. How satisfied were you with each of the following? (1 star = "not very satisfied", 5 stars = "very satisfied")

Satisfaction

Live music

Socializing

Fun for the kids

Quality of food

Variety of food

Other items, besides food

5. Is there anything that you would purchase at the Farmers Market if it was available? (Please list specific types of food or products if necessary)

- Vegetables
- Fruits
- Milk, cheese, eggs or other dairy
- Meat
- Honey, nuts, jams, jars, preserves
- Bread/ baked goods

- Prepared foods
- Arts and crafts
- Other

6. Could we improve any of the following to make it easier for you to go to the Farmers Market?

- Affordability
- Time
- Parking
- Bike racks
- Nothing: it is accessible
- Transportation to and from Market
- Closer to Home
- Closer to Work
- Location
- Other

7. To what extent would the following draw you to the Farmers Market? (1= "This interests me the least" and 5= "This interests me the most")

	Very Interesting	Interesting	Neutral	Not interesting	This would keep me from going to the Farmers Market	Not Applicable
Recipe instructions at food vendors' tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooking demonstrations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nutritional information at food vendors' tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities for kids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Gathering Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community garden in a nearby lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gardening tips and demonstrations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Live music	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Double value for LINK card purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other community services, such as a dental clinic or bike safety information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. How important is it to buy food that is grown locally and/or organically?

Very important	Somewhat important	Neutral	Not very important	Unimportant
<input type="radio"/>				

9. If you have any additional comments for specific questions or about the survey in general, please comment here.

10. Gender

Male

Female

11. Age

Young Householder

12. Survey #

Finished? Submit your Survey

50%

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