

Customer Satisfaction Survey FY 2018 - Quarter 4

Quarter 4 Customer Satisfaction Survey

Our members are our #1 priority and we aim to provide a high level of service for overall customer satisfaction.

Please take a few moments to complete our Customer Satisfaction Survey. Your feedback will help us improve our service to meet your needs. Your responses will be kept confidential and will not be used for any purpose other than improving the services we provide.

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1. What is your gender?

- ☐ Female
- ☐ Male
- ☐ None Specified

2. What is your Age Group?

- ☐ 10 - 13 years old ☐ 18 - 29 years old ☐ 55 - 69 years old
- ☐ 14 - 17 years old ☐ 30 - 54 years old ☐ 70 + years old

3. How many days per week do you visit Oneida Family Fitness?

- ☐ 6 times per week
- ☐ 4 - 5 times per week
- ☐ 3 times per week
- ☐ 1- 2 times per week
- ☐ I do not attend

If you do not attend, why not?

4. I visit Oneida Family Fitness primarily for (select all that apply):

- ☐ Train for sport/event
- ☐ Weight management
- ☐ Medical reasons
- ☐ Maintain my physical condition
- ☐ Diabetic Program Referral
- ☐ Meet people and socialize
- ☐ RAS points
- ☐ Pool
- ☐ Kids classes
- ☐ Other

Other (please specify)

* 5. How do you rate our staff and customer service?

	Excellent	Very Good	Average	Needs Improvement	Poor
Select the response that describes your overall impression.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Is there a particular staff member(s) that makes your visit more enjoyable? Add any additional comments.

6. What is your overall rating for programs & services offered at Oneida Family Fitness?

	Excellent	Very Good	Average	Needs Improvement	Poor	N/A
Cardio Equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strength Equip / Free Weights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Group Fitness classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aquatic classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Martial Art programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weight Management / Wellness classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Orientations / Assessments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amenities (locker rooms, pro shop, towel rental, juice bar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Comments

7. How do you rate our cleanliness?

	Excellent	Very Good	Average	Needs Improvement	Poor	N/A
Aerobic studios	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Front Lobby area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gym	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juice Bar area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Locker Rooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Track	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Comments

8. What do you like MOST about Oneida Family Fitness? Select all that apply.

- | | | |
|---|--|---|
| <input type="checkbox"/> Atmosphere | <input type="checkbox"/> Group Fitness/Aquatic classes | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Child care | <input type="checkbox"/> Gym | <input type="checkbox"/> Price |
| <input type="checkbox"/> Cleanliness | <input type="checkbox"/> Hours | <input type="checkbox"/> Staff / Customer service |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Location | <input type="checkbox"/> Track |
| <input type="checkbox"/> Other program/services that help me manage my health | | |

9. What would enhance your membership experience? Select all that apply.

- | | | |
|--|---|---|
| <input type="checkbox"/> Group Fitness or Aquatic class additions (please provide explanation) | <input type="checkbox"/> Location | <input type="checkbox"/> Price |
| <input type="checkbox"/> Equipment changes/additions | <input type="checkbox"/> Massages | <input type="checkbox"/> Sauna |
| <input type="checkbox"/> Hours | <input type="checkbox"/> Member Benefits / Incentives | <input type="checkbox"/> Wellness education |
| <input type="checkbox"/> Other, please specify | | |

10. How are you kept informed of O.F.F. programs, services, and events? Select all that apply.

- | | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> Community / Members | <input type="checkbox"/> Flyers posted in facility | <input type="checkbox"/> Kalihwisaks |
| <input type="checkbox"/> Email | <input type="checkbox"/> Intranet (employee site) | <input type="checkbox"/> Staff |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Internet Website | |
| <input type="checkbox"/> Other (please specify) | | |

11. How would you like to receive communications regarding O.F.F. programs, services, events, closures, etc...? Select all that apply.

☐ Email (please provide/update email addresses with our front desk staff)

☐ I visit the O.F.F. Website regularly

☐ Kalihwisaks

☐ Facebook (LIKE us on Facebook!)

☐ I read announcements/flyers at O.F.F. front desk

☐ Other, please specify

* 12. Overall, how satisfied are you with your O.F.F. membership experience?

Very Satisfied

Satisfied

Dissatisfied

Very Dissatisfied

Select the response that describes your overall impression.

Additional Comment

13. Please share any additional comments or concerns.