

5-A-SIDE FOOTBALL SURVEY OF PLAYERS

Thank you for agreeing to take part in this survey. The survey is designed to provide valuable information about the use made of facilities such as this for playing 5-a-side football. This will help **Sport** Scotland, local authorities and developers in planning facilities in the future.

You have been selected as part of a sample of players to take part in this survey. It is very important to make sure that we get good coverage of all types of players and so your co-operation is appreciated. Please take a few minutes to answer the questions by ticking the appropriate box(es) or by writing in the spaces provided. When you have completed the questionnaire, place it in the envelope provided and either return it to the interviewer who gave you the questionnaire or return it by post. You do not have to put any stamps on the envelope.

To make sure that the answers you provide are treated in the strictest confidence, we do not require your name or address.

By 5-a-side football we mean football played with around 5- 7 players per side on a less than full sized pitch

Q1a) Including today, how often have you played 5-a-side football (both indoor and outdoor) in the last 4 weeks? Write in number of times below

Do not include casual kick-about on grass/blaes in a park etc.

_____ (10 - 11)

Q1b) Including today, how often have you played 5-a-side at this facility in the last 4 weeks? Write in number of times below

_____ (12 - 13)

Q2a) In the last 4 weeks have you played 5 a-side football at any other facilities, either indoor or outdoor?

Do not include casual kick-about on grass/blaes in a park etc.

(14)
Yes 1
No 2

i) IF YES; How many other facilities have you played at?

(15)

| | | |
|-----------|--|---|
| 1 | | 1 |
| 2 | | 2 |
| 3 | | 3 |
| 4 | | 4 |
| 5 or more | | 5 |

ii) IF NO; Why do you choose to play only at this venue?

(16)

If you play at other facilities:

Q2b) At which other facilities have you played 5 -a-side football in the last 4 weeks?

Write in the name of the facility(ies) in the spaces below

Indoor: _____ (17-18)

Outdoor: _____ (19-20)

ALL ANSWER:

Q2c) At which facility does your side/group play at most often? (including this facility)

Write in..... _____ (21-23)

Q2d) Why does your side/group use it most often?

Write in..... _____ (24-25)

Q3) At this time of year, do you have a preference to play indoor or outdoor?

Please tick the one of the following boxes

- (26)
- | | | |
|-----------------------------------|--------------------------|---|
| Will only play outdoor | <input type="checkbox"/> | 1 |
| Strong preference to play outdoor | <input type="checkbox"/> | 2 |
| Slight preference to play outdoor | <input type="checkbox"/> | 3 |
| Don't mind | <input type="checkbox"/> | 4 |
| Slight preference to play indoor | <input type="checkbox"/> | 5 |
| Strong preference to play indoor | <input type="checkbox"/> | 6 |
| Will only play indoor | <input type="checkbox"/> | 7 |
| Don't Know | <input type="checkbox"/> | Y |

Q4a) How long did it take you to travel to this facility today?

Write in the number of minutes for one way journey

_____ minutes (27-29)

Q4b) What was your main method of transport to this facility today?

Please tick the one you spent longest on

(30)

| | | |
|----------------------------|--------------------------|---|
| car/motorcycle – driver | <input type="checkbox"/> | 1 |
| car/motorcycle – passenger | <input type="checkbox"/> | 2 |
| walking | <input type="checkbox"/> | 3 |
| public bus | <input type="checkbox"/> | 4 |
| private coach | <input type="checkbox"/> | 5 |
| bicycle | <input type="checkbox"/> | 6 |
| taxi | <input type="checkbox"/> | 7 |
| Other (write in details) | <input type="checkbox"/> | x |

_____ (31)

Q4c) Was this from...

(32)

| | | |
|--------------------------|--------------------------|---|
| Home | <input type="checkbox"/> | 1 |
| Friend's home | <input type="checkbox"/> | 2 |
| Work | <input type="checkbox"/> | 3 |
| School/College | <input type="checkbox"/> | 4 |
| Pub/Club | <input type="checkbox"/> | 5 |
| Other (write in details) | <input type="checkbox"/> | x |

_____ (33)

Q4d) And when you finish playing, will you travel back to...

(34)

| | | |
|--------------------------|--------------------------|---|
| Home | <input type="checkbox"/> | 1 |
| Friend's home | <input type="checkbox"/> | 2 |
| Work | <input type="checkbox"/> | 3 |
| School/College | <input type="checkbox"/> | 4 |
| Pub/Club | <input type="checkbox"/> | 5 |
| Other (write in details) | <input type="checkbox"/> | x |

_____ (35)

Q5a) Were you personally responsible for making the booking for today's visit?

(36)

| | | |
|------------|--------------------------|---|
| Yes | <input type="checkbox"/> | 1 |
| No | <input type="checkbox"/> | 2 |
| Don't Know | <input type="checkbox"/> | Y |

Q5b) How often do you and your group make bookings for this facility and other five-a-side facilities?

| | | |
|-------------------------------|--|---|
| Today was a 'one-off' booking | | 1 |
| Very infrequently | | 2 |
| Occasionally | | 3 |
| Regularly | | 4 |
| Don't Know | | Y |

Q5c) How satisfied are you with the value for money obtained for today's booking?

| | | | | | |
|---|---|---|---|---|--|
| Very Satisfied | Quite Satisfied | Neither | Not very Satisfied | Not at all Satisfied | Don't Know |
| <input style="width: 30px; height: 20px;" type="text"/> 1 | <input style="width: 30px; height: 20px;" type="text"/> 2 | <input style="width: 30px; height: 20px;" type="text"/> 3 | <input style="width: 30px; height: 20px;" type="text"/> 4 | <input style="width: 30px; height: 20px;" type="text"/> 5 | <input style="width: 30px; height: 20px;" type="text"/> Y (38) |

Q5d) Thinking about today's visit, was this your preferred time, day of week and place?

| | | | |
|------------|---|---|---|
| | (39) Time of day | (40) Day of week | (41) Place |
| Yes | <input style="width: 30px; height: 20px;" type="text"/> 1 | <input style="width: 30px; height: 20px;" type="text"/> 1 | <input style="width: 30px; height: 20px;" type="text"/> 1 |
| *No | <input style="width: 30px; height: 20px;" type="text"/> 2 | <input style="width: 30px; height: 20px;" type="text"/> 2 | <input style="width: 30px; height: 20px;" type="text"/> 2 |
| Don't Know | <input style="width: 30px; height: 20px;" type="text"/> Y | <input style="width: 30px; height: 20px;" type="text"/> Y | <input style="width: 30px; height: 20px;" type="text"/> Y |

Q5e) *IF NO; What would have been your preferred time/day/place to play?

Write details in below

Time(s) _____ (42)

Day(s) _____ (43)

Place(s) _____ (44)

Q6a) How would you describe today's game?

| | | |
|--------------------------------|--|---|
| A casual game with friends | | 1 |
| Part of a league or tournament | | 2 |
| Other (write in details) | | X |

_____ (46)

Q6b) Which of the following best describes how your 5-a-side group originally formed?

Please tick those which apply and/or write in how your team was formed

| | | |
|---|--------------------------|---|
| Formed by group of workmates | <input type="checkbox"/> | 1 |
| Formed by group of friends from outside work | <input type="checkbox"/> | 2 |
| Formed by members of an already established football club | <input type="checkbox"/> | 3 |
| Formed by members of an already established sports club | <input type="checkbox"/> | 4 |
| Other (write in details) | <input type="checkbox"/> | X |

(47)

(48-49)

Q7a) Did the game today have a non-playing referee?

| | | |
|------------|--------------------------|---|
| *Yes | <input type="checkbox"/> | 1 |
| No | <input type="checkbox"/> | 2 |
| Don't Know | <input type="checkbox"/> | Y |

(50)

Q7b) *IF YES; Was he or she qualified as a referee?

| | | |
|------------------------------|--------------------------|---|
| Yes – qualified referee | <input type="checkbox"/> | 1 |
| No - not a qualified referee | <input type="checkbox"/> | 2 |
| Don't Know | <input type="checkbox"/> | Y |

(51)

Q8) In choosing a facility for 5-a-side football, how important are each of the following features?

For each one, tick the appropriate box to indicate its importance.
If you cannot give a rating for any single feature tick 'Don't Know'.

| | Very important | Quite important | Neither | Not very important | Not at all important | Don't Know |
|----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---------------------------------|
| The size of the court/pitch | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (52) |
| The type of surface | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (53) |
| The lighting | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (54) |
| The changing facilities | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (55) |
| The bar and refreshments | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (56) |
| Facilities for food | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (57) |
| The cost of hiring the facility | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (58) |
| A convenient location | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (59) |
| The ease of booking the facility | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (60) |
| That the facility is indoors | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (61) |
| That the facility is outdoors | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (62) |

Q9) Thinking about today's visit to this facility, how would you rate each of the following features?

For each one, tick the appropriate box to indicate your rating.
If you cannot give a rating for any single feature tick 'Don't Know'.

| | Very good | Quite good | Neither | Quite poor | Very poor | Don't Know |
|----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---------------------------------|
| The size of the court/pitch | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (63) |
| The type of surface | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (64) |
| The lighting | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (65) |
| The changing facilities | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (66) |
| The bar and refreshments | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (67) |
| Facilities for food | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (68) |
| The cost of hiring the facility | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (69) |
| A convenient location | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (70) |
| The ease of booking the facility | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (71) |
| That the facility is indoors | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (72) |
| That the facility is outdoors | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> Y (73) |

Q10) If you play 5-a-side football outdoors, what is your favourite type of surface?

| | | |
|------------------------------------|----------------------------|------|
| Artificial grass | <input type="checkbox"/> 1 | (74) |
| Sand filled artificial grass | <input type="checkbox"/> 2 | |
| Rubber crumb | <input type="checkbox"/> 3 | |
| Tarmac | <input type="checkbox"/> 4 | |
| Porous concrete (e.g. Tennisquick) | <input type="checkbox"/> 5 | |
| Don't know | <input type="checkbox"/> Y | |
| Other (write in details) | <input type="checkbox"/> | |

(75)

Q11) How much, if anything did you spend on today's visit?

| | |
|------------|-------|
| OFFICE USE | |
| 1-4 | 3566 |
| 5-8 | _____ |
| 9 | 2 |

| | | | | |
|------------------------|---|---|---|---------|
| On travel? | £ | : | p | (10-13) |
| On fees for playing? | £ | : | p | (14-17) |
| On food at the venue? | £ | : | p | (18-21) |
| On drink at the venue? | £ | : | p | (22-25) |
| TOTAL | £ | : | p | (26-29) |

Q12) Do you play 5 -a-side football....

| | | |
|-----------------------|----------------------------|------|
| all year round? | <input type="checkbox"/> 1 | (30) |
| mainly in the summer? | <input type="checkbox"/> 2 | |
| mainly in the winter? | <input type="checkbox"/> 3 | |

occasionally? 4

Q13a) For what reasons did you originally start playing 5 -a-side football regularly?

(31-33)

Q13b) Since you started playing 5-a-side football, have you

Played more or less without interruption 1
*Stopped and then started again 2
Other (write in details) x

(34)

(35)

**Q13c) *If you stopped and started again:
What were your reasons for a) stopping and b) starting again?**

a) Reasons for stopping

(36-37)

b) Reasons for starting again

(38-39)

Q14) Do you currently play 11-a-side football on a regular basis?

Yes 1
No 2

(40)

Finally, to help us analyse the information, could you answer the following questions about yourself.....

Your Sex?

(41)

Male 1

Female 2

Your Age?

(42)

16-24 years 1

25-34 years 2

35-44 years 3

45-54 years 4

55 years or over 5

What is the occupation of the chief income earner in your household?

.....

If they are responsible for any staff, how many?

(43)

AB 1

C1 2

C2 3

DE 4

.....

Please write in the following details about where and when you were contacted by the interviewer...

Name of facility _____

(44-45)

Day of the week _____

(46)

Time of Day (24 hour clock) _____

Thank you for your co-operation. Please place the questionnaire in the envelope and return it to the interviewer or by post to:

System Three
19 Atholl Crescent
Edinburgh
EH3 8WZ