



**TTASPE**

"The Trinidad & Tobago Alliance  
for Sport & Physical Education"

## Membership Questionnaire

*The Trinidad & Tobago Alliance for Sport and Physical Education is currently re-structuring its membership strategy. To assist in this process, we are seeking the opinions of current and potential TTASPE members. Completing the following questionnaire will assist us in encompassing the needs and wants of our members. We value your feedback and thank you for your time and assistance.*

1) Are you currently a TTASPE member?

Yes

No

If yes, please state the number of years \_\_\_\_.

2) Please rank the following in terms of importance to you in the context of member benefits (1 being the highest)

- \_\_\_\_\_ Volunteer opportunities
- \_\_\_\_\_ Discount cards for a. Sport Equipment b. Books c. Gym membership
- \_\_\_\_\_ Discount and preference for registration
- \_\_\_\_\_ Resource library
- \_\_\_\_\_ Networking opportunities
- \_\_\_\_\_ Quarterly correspondence
- \_\_\_\_\_ Opportunities to publicize work
- \_\_\_\_\_ Opportunities for professional development

3) Are there any other benefits you feel are important for TTASPE members?

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4) Please state an amount you would feel comfortable pay as an annual membership fee?

- \$50-100
- \$100-150
- \$150-200

\$200+

5) What type of volunteering activity would you be interested in supporting?

\_\_\_\_\_ One Time Events (eg. workshops, conferences, game days, fun days)

\_\_\_\_\_ Supervision and coordination a community program (eg.

coaching/supervising children and youth for 1-2 hours, 1-2 days a week)

\_\_\_\_\_ Administrative support (eg. assistance with TTASPE for special events, advocacy or promotional campaigns, sourcing funding)

\_\_\_\_\_ Mentorship (eg. volunteering time and expertise to assist in building the capacity of others in your field of expertise)

6) What geographical area would you be interested in volunteering (based on where you live/work)?

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7) Is there a particular population you would be interested in working with? Please check all applicable.

\_\_\_\_\_ Children & Youth Sports

\_\_\_\_\_ Persons with Disabilities

\_\_\_\_\_ HIV & AIDS awareness

\_\_\_\_\_ Administration & capacity building with coaches and facilitators

8) Realistically how much time would you have available to volunteer?

\_\_\_\_\_ 2 hours, 1 day a week

\_\_\_\_\_ 2 hours, 2 days a week

\_\_\_\_\_ one time events

\_\_\_\_\_ other : \_\_\_\_\_

9) What time in the day would be most suitable for volunteering?

\_\_\_\_\_ Day time during the week

\_\_\_\_\_ Evenings during the week

\_\_\_\_\_ Weekends

### Demographic Information

#### Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

E-mail: \_\_\_\_\_

Age: \_\_\_\_\_

Sex: \_\_\_\_\_

Occupation: \_\_\_\_\_