

TOURISM SURVEY



T1 Which of the following best describes your tourism business? **(select one)**

- | | | |
|---|---|--|
| <input type="checkbox"/> Hotel / motel/ inn | <input type="checkbox"/> Campground / RV Park | <input type="checkbox"/> Tour operation |
| <input type="checkbox"/> Resort | <input type="checkbox"/> Attraction | <input type="checkbox"/> Agri-tourism (e.g. wineries, breweries) |
| <input type="checkbox"/> Bed and breakfast | <input type="checkbox"/> Restaurant | <input type="checkbox"/> Other |

If other, please specify:

T2 What time of the year is your business open? **(select one)**

- | | |
|---|--|
| <input type="checkbox"/> Year round (go to question T4a) | <input type="checkbox"/> Spring, Summer and Fall |
| <input type="checkbox"/> Summer only | <input type="checkbox"/> Other |
| <input type="checkbox"/> Winter only | |

If other, please specify:

T3 Does your business have the potential to expand into other seasons?

- Yes No

If yes, what would it take to expand into other seasons? **(select all that apply)**

- | | |
|---|--|
| <input type="checkbox"/> Indoor facilities | <input type="checkbox"/> Building insulation / heating |
| <input type="checkbox"/> Increase visitorship in the off-season | <input type="checkbox"/> Other |

If other, please specify:

T4 a) What are the advantages to operating a tourism business in this area? **(list up to three)**

- Proximity to lake
- Close to highway
- Rural / agricultural communities
- Seasonal traffic
- Community support

Other (please specify):

T4 b) How would you rate the following challenges to operating a tourism business in this area?
NA = Not Applicable 1 = Not a challenge 2 = Somewhat challenging 3 = Challenging 4 = Very challenging

	NA	1	2	3	4
Red tape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seasonal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staffing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet / broadband	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotion.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

T5 Rate your level of satisfaction with the tourism facilities in this area.
NA = Not Applicable 1 = Poor 2 = Fair 3 = Good 4 = Excellent

	NA	1	2	3	4
Accommodations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attractions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retail.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information / visitor centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wayfinding signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highway signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of public washrooms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition & cleanliness of public washrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

T6 How would you rate the following as assets / infrastructure you would like to see developed to support tourism? **1 = Indifferent 2 = Low priority 3 = Medium priority 4 = High priority**

	1	2	3	4
Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Better signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information / visitor centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accommodations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Events / festivals.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public washrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotion / marketing support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

T7 Please estimate the percentage of your visitors that come for a day trip and the percentage that are overnight visitors?

Day trip:

--	--	--

 %

Overnight:

--	--	--

 %

T7b On average, how many nights does a typical visitor stay? (select one)

- Not applicable 2 - 3 nights 6 -7 nights
 1 night 4 - 5 nights 7+ nights

T8 Are visitors to this business most likely to be: (select the top three)

- Families Couples Seniors Other
 Business Solo Groups

If other, please specify:

T9 What are your typical target markets (before the Covid-19 pandemic)? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Local within 100km | <input type="checkbox"/> Other Provinces (see below) |
| <input type="checkbox"/> Ontario | <input type="checkbox"/> USA (see below) |
| <input type="checkbox"/> Quebec | <input type="checkbox"/> International (see below) |

If other provinces, please specify:

If USA, please specify the states:

If international, please specify:

T10 What do you feel are the products / activities that attract visitors to the area? (select up to five)

- | | | |
|---|---|--|
| <input type="checkbox"/> Adventure (e.g. ziplining) | <input type="checkbox"/> Festivals / events | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Agri-tourism | <input type="checkbox"/> Fishing | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Arts & culture | <input type="checkbox"/> Golf | <input type="checkbox"/> Sightseeing |
| <input type="checkbox"/> Beach | <input type="checkbox"/> Heritage | <input type="checkbox"/> Sporting events |
| <input type="checkbox"/> Casino | <input type="checkbox"/> Hunting | <input type="checkbox"/> Snowmobiling / ATV |
| <input type="checkbox"/> Craft breweries / distilleries | <input type="checkbox"/> Motorcycle tours | <input type="checkbox"/> Trails |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Music | <input type="checkbox"/> Water based activities (e.g. boating) |
| <input type="checkbox"/> Culinary / food | <input type="checkbox"/> Museums | <input type="checkbox"/> Wineries |

T11 Are you involved with the following organizations:

	Yes	No	Don't know
Regional Tourism Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Destination Management/Marketing Organization (DMO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

T11b If yes to DMO, please specify the organization:

T12 Are you a member of any other tourism organization?

- Yes No

If yes, please specify:

T13a Do you offer packages? (i.e. services and goods combined into a special offer; e.g. accommodations + event ticket + dining)

- Yes No (go to question T13d)

T13b If yes, who do you package with?

- Only include my own amenities Partner with others

T13c Who handles the promotion of the packages?

- | | |
|--|---|
| <input type="checkbox"/> Self | <input type="checkbox"/> Tourism association |
| <input type="checkbox"/> Self and partners | <input type="checkbox"/> Local Destination Marketing Org. |
| <input type="checkbox"/> Tour / travel agent | <input type="checkbox"/> Region Tourism Organization |
| <input type="checkbox"/> Chamber of Commerce | <input type="checkbox"/> Other |
| <input type="checkbox"/> Municipality | |

If other, please specify:

T13d If no, what are the barriers to you offering packages?

- | | |
|---|--|
| <input type="checkbox"/> Time | <input type="checkbox"/> Has not yet been considered |
| <input type="checkbox"/> Lack of partners | <input type="checkbox"/> Other |
| <input type="checkbox"/> Lack of knowhow | |

If other, please specify:

T14 What methods do you use to promote your business? (select all the apply)

- | | |
|--|---|
| <input type="checkbox"/> Print (e.g. flyers, newspaper, magazines) | <input type="checkbox"/> Word of mouth and networking |
| <input type="checkbox"/> Website | <input type="checkbox"/> Trade shows or business events |
| <input type="checkbox"/> Television / radio | <input type="checkbox"/> Travel review website |
| <input type="checkbox"/> Social media (e.g. Facebook, Twitter) | <input type="checkbox"/> Email / e-newsletters |
| <input type="checkbox"/> Co-op advertising campaigns | <input type="checkbox"/> Other |

If other, please specify:

T15 a) Where do you get your market research regarding tourism trends, market & growth opportunities, etc.? (select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Government of Ontario | <input type="checkbox"/> Tourism Industry Association of Ontario (TIAO) |
| <input type="checkbox"/> Local Destination Marketing Organization (DMO) | <input type="checkbox"/> Sector associations |
| <input type="checkbox"/> Regional Tourism Organization | <input type="checkbox"/> Newsletters |
| <input type="checkbox"/> Economic Development department / Ontario's West Coast | <input type="checkbox"/> In-house |
| | <input type="checkbox"/> Other |

If other, please specify:

T15 b) Have you attended any of the following?

	Yes	No
Huron County webinars	<input type="checkbox"/>	<input type="checkbox"/>
Tourism summits	<input type="checkbox"/>	<input type="checkbox"/>
Small Business & Enterprise Centre workshops	<input type="checkbox"/>	<input type="checkbox"/>

T16 Does the market research information you receive assist you in making business decisions?

- Yes No

If no, what additional information would be useful?

Thank you for your participation in the Huron County Business Retention & Expansion Project