

T1. Which of the following best describes your tourism business?

- | | | |
|--|---|--|
| <input type="radio"/> Hotel/Motel/ Inn | <input type="radio"/> <input type="checkbox"/> Resort | <input type="radio"/> <input type="checkbox"/> Bed and Breakfast |
| <input type="radio"/> Campground/RV Park | <input type="radio"/> Attraction | <input type="radio"/> Restaurant |
| <input type="radio"/> Tour guide | <input type="radio"/> Transportation | <input type="radio"/> Agri-tourism |
| <input type="radio"/> Other (Please specify) _____ | | |

T2. What time of the year is your business open?

- | | |
|---|---|
| <input type="radio"/> Year round (Go to QuestionT4a) | <input type="radio"/> Summer only |
| <input type="radio"/> Winter only | <input type="radio"/> Spring, summer and fall |
| <input type="radio"/> Other (Please specify): _____ | |

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

- Yes No

b) If yes, what would take to expand into other seasons?

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

T4. b) What are the challenges to operating a tourism business in this area? (**List up to three**).

T5. Rate your level of satisfaction with the tourism facilities in this area.

4 = Excellent 3 = Good 2 = Fair 1 = Poor NA = Not applicable

Tourism facilities	4	3	2	1	NA
Accommodations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attractions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Information centres	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Highway signage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Highway rest areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of public washrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Condition & cleanliness of public washrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

T6. Are there assets or infrastructure that you would like to see developed to support tourism?

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

% day trip: _____ % overnight: _____

T7. b) On average, how many nights does a typical visitor stay?

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

T8. Visitors to this business are they most likely to be? **Select the top three.**

- Families
 Business
 Couples
 Solo
 Seniors
 Groups
 Other (Please specify) _____

T9. What are your target markets? **Select all that apply.**

- Local within 100 km
 Ontario
 Quebec
 Other Provinces (Please specify) _____
 USA (Please specify the States) _____
 International (Please specify) _____

T10: What do you feel are the products/activities that attract visitors to the area? **Select up to five**

Adventure (eg ziplining)	<input type="checkbox"/>
Agri-tourism	<input type="checkbox"/>
Arts & culture	<input type="checkbox"/>
Casino	<input type="checkbox"/>
Craft breweries / cideries / distilleries	<input type="checkbox"/>
Cycling	<input type="checkbox"/>
Culinary/food	<input type="checkbox"/>
Fishing	<input type="checkbox"/>
Golf	<input type="checkbox"/>
Heritage	<input type="checkbox"/>
Hunting	<input type="checkbox"/>
Motorcycle tours	<input type="checkbox"/>
Music	<input type="checkbox"/>
Museums	<input type="checkbox"/>
Outdoor activities (eg bird watching, trails, nature)	<input type="checkbox"/>
Performing arts	<input type="checkbox"/>
Shopping	<input type="checkbox"/>
Sightseeing	<input type="checkbox"/>

Sporting events	<input type="checkbox"/>
Snowmobiling or ATV adventures	<input type="checkbox"/>
Trails	<input type="checkbox"/>
Water based activities (boating etc.)	<input type="checkbox"/>
Wineries	<input type="checkbox"/>
Other (Specify): _____	<input type="checkbox"/>

T11. Are you involved with the following organizations:

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

T12. Are you a member of any other tourism organization?

- Yes No

If yes, please specify? _____

T13. a) Do you offer packages?

- Yes No (Go to Question T13d)

T13. b) Who do you package with?

- Only include my own amenities
 Partner with others

T13. c) Who handles the promotion of the packages?

- Self
 Self and partners
 Tour / travel agent
 Chamber of Commerce / municipality
 Tourism association
 Local Destination Marketing Organization (DMO)
 Regional Tourism Organization
 Other (please specify): _____
Go to Question T14

T13 d) If no, what are the barriers to you offering packages?

T14. What methods do you use promote your business? **Select all that apply.**

- Print (e.g. flyers, newspaper, magazines)
- Website
- Television/Radio
- Social Media (e.g. Facebook, Twitter)
- Co-op advertising campaigns
- Word of mouth and networking
- Trade shows or business events
- Travel review website
- Email/ e-newsletters
- Other (please specify) _____

T15. Where do you get your market research regarding tourism trends, market & growth opportunities, etc.? **Select all that apply**

- Government of Ontario
- Local Destination Marketing Organization (DMO)
- Regional Tourism Organization
- Economic Development Department
- Tourism Industry Association of Ontario (TIAO)
- Sector Association
- Conferences
- In-House
- Other (Specify): _____

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

- Yes No

If no, what additional information would be useful? _____