

City of Palm Springs & Time Warner Cable Survey

Please answer the multiple-choice questions by inserting an "X" between the parentheses to the left of the answer you wish to indicate, like this: (X).

When appropriate, type your answer in the space provided below a question if it asks for an open-ended response.

1. Do you currently subscribe to the cable TV service provided by Time Warner?

() -- Yes

() -- No (If you answered 'No', skip to Question 7)

2. [If you answered "Yes" to Question 1]: Do you think Time Warner should offer more channels?

() -- Yes

() -- No

() -- Maybe

3. The City of Palm Springs operates cable channel 17, which features coverage of City Council and other local government meetings, special events sponsored by the City, and a bulletin board of local events. Have you ever watched cable channel 17?

() -- Yes

() -- No [If you answered 'No', skip to Question 7]

4. [If you answered "Yes" to Question 3]:

How often did you watch programming on channel 17 during the past month?

() -- More than 10 times

() -- 6 - 10 times

() -- 1 - 5 times

() -- Never

5. Please describe or provide the names of the programs that you have watched on channel 17 during the past month:

6. Is the signal quality for programming on channel 17 equal to the signal quality for programs on the other Time Warner cable channels?

() -- Yes

() -- No

() -- Don't Know

7. How important do you think it is to have cable TV channels that feature programs about Palm Springs residents, organizations, events, schools, and government?

- Very Important
- Important
- Not Very Important
- Not Important at All

8. Many cities in the U.S. have 'community media centers' that provide TV production facilities where residents, arts and civic groups, and others learn how to make programs to show on a local cable channel. Do you think Palm Springs should also have such a media center with TV production facilities available for community use?

- Yes
- No
- Maybe
- Don't Know

9. Would the organization(s) that you are involved with be interested in having programs about their services and activities appear on a local cable TV channel?

- Yes
- No

10. Please indicate the methods that your organization currently uses to communicate with its members, constituents and the general public (check all that apply):

- Letters, newsletters and other materials via US Mail
- Flyers & posters placed on bulletin boards, etc.
- Press releases to a variety of media outlets
- Internet, via:
 - Mass/Bulk E-mail
 - Web site
 - Listserves/Discussion Groups
- Newspapers, via:
 - Articles
 - Op-Ed columns
 - Letters to editor
- Radio programs:
 - as a Host/Producer
 - as a Guest
- via Public Service Announcements

- Broadcast television, via:
- Public Service Announcements
- Guest appearances on news programs and/or talk shows
- Paid advertising:
- in Newspapers
- on TV
- on Radio
- Other (please describe):

11. Please indicate the types of information that your organization would like to share with its members, constituents and the general public (check all that apply):

- General information about your organization and its services
- Benefits of becoming a member in your organization
- Opportunities for people to participate in your organization's activities
- Promotional information about an upcoming event
- Reports about or coverage of a recent event that was held by your organization
- Other (please describe):

12. Please indicate which of the following would encourage you and your organization to produce programs to show on a community television channel (check all that apply):

- Easy to use equipment in a community TV studio
- Portable equipment that can be checked out to record or edit a video program
- Ability to present programming live from locations throughout Palm Springs
- Advice to help you improve your programs
- Training classes that are offered on days and times that fit your schedule (please specify days and time below)
- Other (please describe):

13. Thank you very much for your assistance. You are invited, but not required, to provide the following information about yourself and/or the organization you are associated with:

Name:

Organization:

Address:

Telephone Number: