**Rucker Ambassador Saturday Basketball Workout Program**

# Parent Survey

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Read each question carefully and check the box for the correct answer***

1. What basketball goals would you like your child to receive by participating in the Rucker Ambassadors AAU Basketball Program? **(check all that apply)**

* Improve physical strength
* Improve skills within the game and knowledge of basketball
* Learn Basketball Drills
* Participate in tournaments
* Learn about different careers in basketball

1. What is your gender?

* Male
* Female

1. What type of afterschool activities would you like your child to participate in **(check all that apply)**

* Homework Assistance
* Mentorship
* Life Skills Workshops
* Career Exploration
* Money Management
* Recreational
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many days a week would you like your child to participate in program?

* 0 to 1 day
* 1 to 2 days
* 2 to 4 days
* 5 days or more a week

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* Learn about different careers in basketball