



LincolnPARK

COAST CULTURAL DISTRICT

450 Washington Street, Newark, NJ 07102 Phone (973) 242-4144 Fax (973) 732-4012

Lincoln Park Music Festival
FESTIVAL FAN SURVEY

1. Tell Us About Yourself

City: _____ State: _____ Zip: _____

Country: _____

OPTIONAL – Give us your email address and you are automatically entered into a drawing to win a VIP Experience Package for you and a guest to the 11th Annual Lincoln Park Music Festival!!!

Email Address: _____

Age Range: (Circle one)

Under 18 years old

18-24 years old

25-34 years old

35-49 years old

50 and over years old

Ethnicity: (Circle one or Fill In Other)

African American/Black

Caucasian/White

Spanish/Hispanic/Latino

Mexican

Puerto Rican

Cuban

Spanish/Hispanic/Latino Other: _____

Native American/Alaska Native

Asian Indian

Asian Chinese/Korean/Vietnamese

Asian Other: _____

Pacific Islander

Filipino

Native Hawaiian

Bi-Racial/Multi-Racial

Other: _____

Gender: (Circle one)

Male

Female

LGBT:

Yes _____

No _____

2. Tell Us About Your Festival Experience

Festival Dates Attended (Circle all dates attended)

Friday, July 24th, 2015

Saturday July 25th, 2015

Sunday, July 26th, 2015

Festival Events Attended (Circle all events attended)

Jazzy Soul at Hotel Indigo

Vivian Green at The Taste/Suite 53

Russell Taylor at Robert Treat Hotel

AllHipHop.com Ciphers Events at Centerstage Cuts and Burger Walla

The Philly Black Pride Tea Mixer

The Announcement Mixer at Rio Lounge

Have you attended the Lincoln Park Music Festival before?

Yes _____ If yes, # of times attended in the past? _____

No _____

Did you stay in a Newark area hotel?

Yes _____ If yes, name of hotel? _____ Location? _____

No _____

Did you eat in a Newark area restaurant?

Yes _____ If yes, name of restaurant? _____ Location? _____

No _____

Did you purchase food/drink at the Lincoln Park Music Festival?

Yes _____ If yes, estimated amount spent? _____ # times made a food/drink purchase?

No _____

Did you enjoy the variety of food/drink at the Lincoln Park Music Festival?

Yes _____

No _____ If no, why not?

What kinds of food/drink would you like to see at the Lincoln Park Music Festival?

[Fill In The Blank] _____

Did you purchase items from local artisans or other merchandise at the Lincoln Park Music Festival?

Yes _____ If yes, estimated amount spent? _____ # times made a merchandise purchase?

No _____

Did you enjoy the variety of artisans or other merchandise at the Lincoln Park Music Festival?

Yes _____

No _____ If no, why not?

What kinds of artisans or other merchandise would you like to see at the Lincoln Park Music Festival?

[Fill In The Blank] _____

Did you visit Sustainable Health and Wellness Village?

Yes _____

No _____ If no, why not?

What are/were your health and wellness priorities? (Circle all that apply)

Education

Food

Recreation (Circle one)

For Adults

Seniors

Teens

Diabetes

Heart Disease

Cancer

HIV

Safety (Circle all that apply)

Violent Crimes

Domestic Violence

Gang Violence

Bullying

Economic Wellness (Circle all that apply)

Job Training (Adults)

Job Training (Teens)

Mental Health

Substance Abuse

Housing (Circle all that apply)

Affordable/Sustainable Housing

Emergency Housing

Obesity (Circle all that apply)

Adults

Teens

Adolescents

In Home Family Support Services (Circle all that apply)

Homecare Services

Homemaker Services

Social Services

Childcare

Did you (your child) visit Kids Zone Village?

Yes _____

No _____ If no, why not?

What did you (your child) participate in within Kids Zone? (Circle all that apply)

Bouncy House

Skateboarding Clinic

NY Knicks Basketball Clinic Vehicle

Board Games

Other: _____

Did you visit Senior Village (Friday, July 25th)?

Yes _____

No _____ If no, why not?

What kinds of activities and/or services would you like to see at the Lincoln Park Music Festival Villages (Sustainable Health and Wellness Village, Kids Zone Village and Senior Village)?

[Fill In The Blank] _____

Did you hear sponsor mentions and information from the stage?

Yes _____

No _____ If no, why not?

Which sponsor experience did you enjoy the most?

Panasonic

United Way

PSEG

NY Knicks Basketball Clinic Vehicle

Other: _____

3. Tell Us About Your Music Preferences

What is your favorite musical genre? (circle all that apply)

House Music

Old School Soul

Contemporary/Current R&B Hits

Neo-Soul

Jazzy-Soul

Jazz

Gospel Contemporary/Current

Gospel Traditional/Old School

Hip Hop/Rap (all sub-genres included – hard core, alternative/rock-rap, old school, new school, southern/bounce, other)

EDM (Electronic Dance Music)

Dancehall

Reggae

Calypso

Soca

Compa (Hip Hop/Compa)

Reggaeton

Salsa

Bachata

Banda

Meringue

Samba

Bossa Nova

Mariachi

Music of Portugal

Other? [Fill In The Blank] _____

If you could see your favorite artist perform at the Lincoln Park Music Festival, who would that be?

[List one artist] _____

Would you prefer your favorite artist to perform a brief performance at an intimate venue, theater size show or full concert at large-scale arena? (Circle one)

Brief performance at an intimate venue

Theater sized show

Full concert at large-scale arena

Would you be willing to pay to see your favorite artist perform?

Yes _____

No _____

What is the most you would be willing to pay to see your favorite artist perform? (Circle one)

Under \$25

\$26-\$45

\$46-\$65

\$66-\$85

\$85 and over

4. Any other feedback you would like to share with the Lincoln Park Music Festival? [Fill In The Blank]

RETURN THIS SURVEY BY: August 31, 2016

HOW TO RETURN THIS SURVEY:

Via Fax:

1-973-732-4012

Via Email:

lpccdmarketing@gmail.com

Via Mail:

Lincoln Park Coast Cultural District
450 Washington Street
Newark, NJ 07102
ATTN: LPMF10 Survey