

## Comfort Ratings

**The video will play on a loop.** Note the clip number and start recording your responses when you are ready to begin. **Please circle the first clip number you rate.** Each clip shows a bike lane, intersection, or other place someone could ride a bicycle. Some locations appear in more than one clip, but with slight differences.

\*Each clip will be shown twice, after which you will rate it based on how comfortable you would feel riding a bicycle in that situation. The rating scale is:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<i>Very Uncomfortable</i>	<i>Somewhat Uncomfortable</i>	<i>Neither Uncomfortable nor Comfortable</i>	<i>Somewhat Comfortable</i>	<i>Very Comfortable</i>

\*\*Several clips will be shown a third time, when you'll be asked to indicate if you would consider riding a bike in that situation with a 10-year old child (on their own bike).

**Want a practice run?**

*We suggest watching 2-3 clips before you begin assigning ratings. You can use the table to the right to do a test run ->*

<b>Clip</b>	<b>Comfort Rating</b>		<b>Ride with child?</b>
<b>#</b>	Very Uncomfortable	Very Comfortable	<i>(Yes or No – only for select clips)</i>
<b>Practice Clip</b>	1 - 2 - 3 - 4 - 5		
<b>Practice Clip</b>	1 - 2 - 3 - 4 - 5		

<b>Clip</b>	<b>Comfort Rating</b>		<b>Ride with child?</b>
<b>#</b>	Very Uncomfortable	Very Comfortable	
<b>1</b>	1 - 2 - 3 - 4 - 5		
<b>2</b>	1 - 2 - 3 - 4 - 5		
<b>3</b>	1 - 2 - 3 - 4 - 5		Y / N
<b>4</b>	1 - 2 - 3 - 4 - 5		Y / N
<b>5</b>	1 - 2 - 3 - 4 - 5		
<b>6</b>	1 - 2 - 3 - 4 - 5		
<b>7</b>	1 - 2 - 3 - 4 - 5		
<b>8</b>	1 - 2 - 3 - 4 - 5		
<b>9</b>	1 - 2 - 3 - 4 - 5		
<b>10</b>	1 - 2 - 3 - 4 - 5		
<b>11</b>	1 - 2 - 3 - 4 - 5		Y / N
<b>12</b>	1 - 2 - 3 - 4 - 5		
<b>13</b>	1 - 2 - 3 - 4 - 5		Y / N

<b>Clip</b>	<b>Comfort Rating</b>		<b>Ride with child?</b>
<b>#</b>	Very Uncomfortable	Very Comfortable	
<b>14</b>	1 - 2 - 3 - 4 - 5		
<b>15</b>	1 - 2 - 3 - 4 - 5		
<b>16</b>	1 - 2 - 3 - 4 - 5		
<b>17</b>	1 - 2 - 3 - 4 - 5		
<b>18</b>	1 - 2 - 3 - 4 - 5		Y / N
<b>19</b>	1 - 2 - 3 - 4 - 5		
<b>20</b>	1 - 2 - 3 - 4 - 5		Y / N
<b>21</b>	1 - 2 - 3 - 4 - 5		
<b>22</b>	1 - 2 - 3 - 4 - 5		
<b>23</b>	1 - 2 - 3 - 4 - 5		
<b>24</b>	1 - 2 - 3 - 4 - 5		
<b>25</b>	1 - 2 - 3 - 4 - 5		
<b>26</b>	1 - 2 - 3 - 4 - 5		

**Is there anything you would like to explain about your ratings?**

**\*AFTER viewing and rating each of the clips, complete the section below**

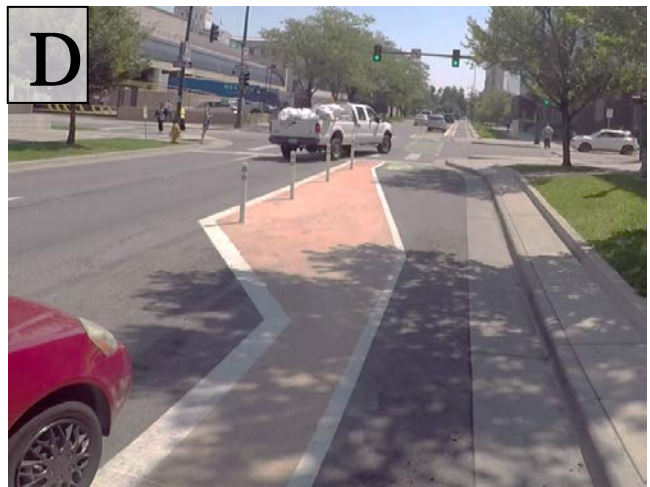
Would you prefer to ride through intersection A or B on a bicycle? *Circle your response* A / B

*Briefly explain your choice:*



Would you prefer to ride through intersection C or D on a bicycle? *Circle your response* C / D

*Briefly explain your choice:*



**Now, compare your preference from A/B to your preference from C/D.**

Which would you prefer to ride through on a bicycle? \_\_\_\_

*Please briefly explain your choice:*

## About Biking

**When the weather is nice, about how many days per month do you ride a bike?**

\_\_\_\_\_ # days  
Enter # between 0 and 30

	In the last month	In the last year	In the last 5 years	More than 5 years ago	Never
When was the most recent time you rode a bicycle primarily <b>for fun or exercise</b> ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When was the most recent time you rode a bicycle primarily <b>for transportation</b> ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**In the past year, have you ridden a bicycle on ...**

... a path or trail separate from the street	<input type="checkbox"/> No	<input type="checkbox"/> Yes
... a quiet residential street	<input type="checkbox"/> No	<input type="checkbox"/> Yes
... a busy street with speeds up to 30 mph, WITH a striped bike lane	<input type="checkbox"/> No	<input type="checkbox"/> Yes
... a busy street with speeds up to 30 mph, WITHOUT a striped bike lane	<input type="checkbox"/> No	<input type="checkbox"/> Yes
... a busy street with speeds up to 30 mph, with a physically-separated bike lane (e.g. with a curb, posts or planter boxes)	<input type="checkbox"/> No	<input type="checkbox"/> Yes

**Do you agree or disagree with the following statements about travel and bicycling:**

	Strongly Disagree	Disagree	Agree	Strongly Agree
I would like to ride a bicycle more than I currently do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic on streets keeps me from riding a bike (or riding more)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Many places I need to go are within a reasonable biking distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often see people riding bikes in my neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often see people <i>like me</i> riding bikes in my neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I prefer to get around by modes other than by riding a bicycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bike lanes make it harder to get around my neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually have to transport things or people when I travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would like my city/town to invest in projects (such as bike lanes) that make riding bikes safer and easier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## About Travel

***In the past week, how did you get around?***

	No Trips	Some Trips	Most Trips
In a personal car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Car share (Zipcar, Car2Go, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taxi / Uber / Lyft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transit (bus, rail, Access-A-Ride, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bicycling (personal bike)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bicycling (bike share)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## About you and your household

**Do you currently have a . . . ?**

*Check all that apply.*

- Driver's license       Transit pass  
 Working bicycle       Car or truck

**Do you currently work . . . ?**

- Full-time       Not employed  
 Part-time       Retired

**Are you currently a student?**

- Full-time     Part-time     Not a student

**Do you identify as . . . ?**

- Female     Male     \_\_\_\_\_

**What is the highest level of school you have completed?**

- Less than high school  
 High school diploma/GED  
 Some college or Associate's degree  
 Bachelor's degree  
 Graduate or professional degree

**What is your age?** \_\_\_\_\_ years

**Do you consider yourself . . . ?**

*Check all that apply.*

- Hispanic, Latino, or Spanish origin  
 American Indian or Alaska Native  
 Asian  
 Black or African American  
 White  
 Prefer not to say  
 Other: \_\_\_\_\_

**What is your home zip code?** \_ \_ \_ \_ \_

**How many people are in your household?**

# People \_\_\_\_\_

Of those, how many are children under 16 years of age? # \_\_\_\_\_  
Enter 0 if none

I don't have children

**What is your annual household income?**

- Less than \$24,999     \$75,000 - \$99,999  
 \$25,000 - \$49,999     \$100,000 - \$149,999  
 \$50,000 - \$74,999     \$150,000 or more

**Is there anything else you would like to add or explain?**