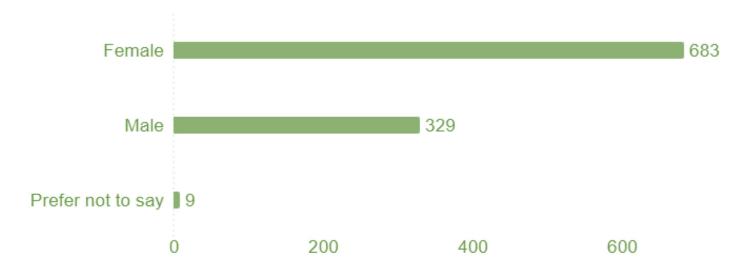
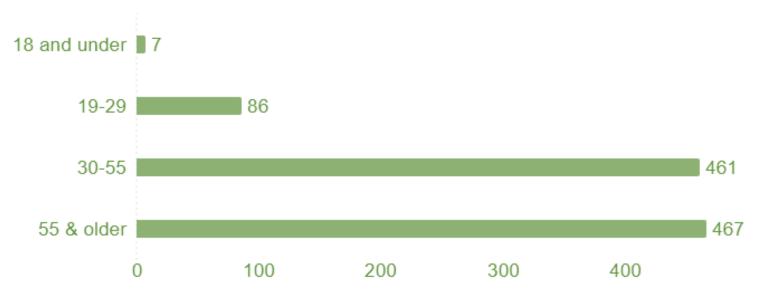
Logan Health Fitness Center 2025 Survey Results

Q2 - What is your gender?



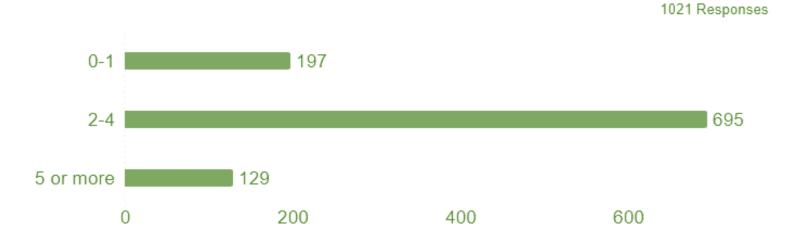


Q3 - What is your age?



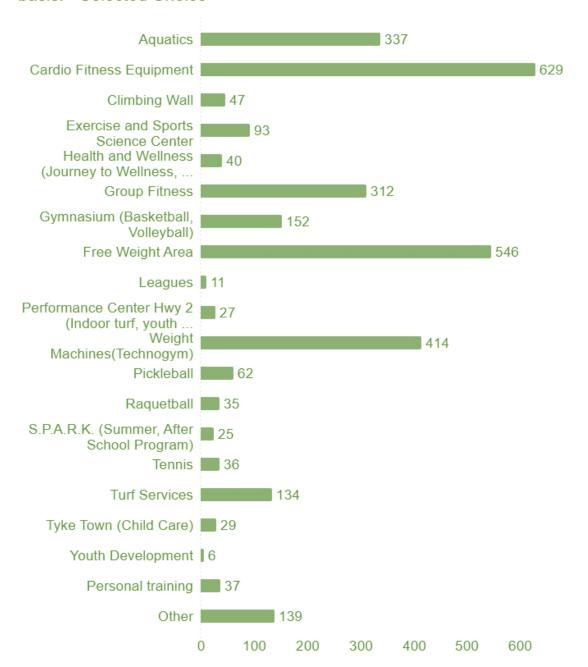


Q4 - On average, how many days per week do you visit our fitness center?



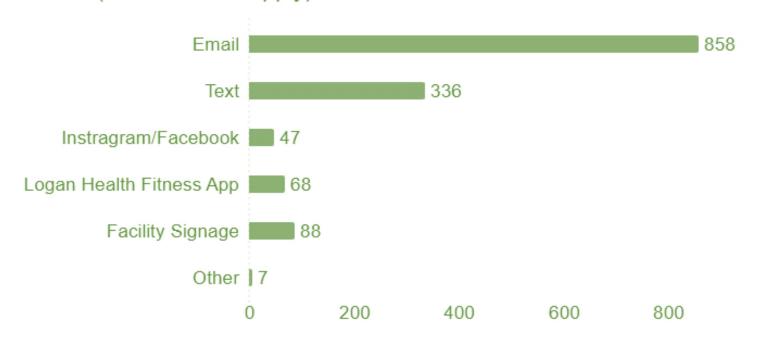


Q6 - Please select all the activities/services you utilize on a weekly basis: - Selected Choice



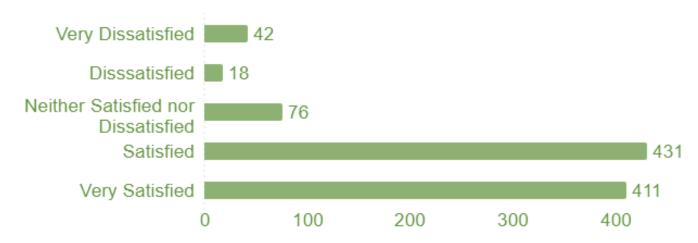


Q9 - How do you prefer to receive communication from the Fitness Center: (Select all that apply) - Selected Choice



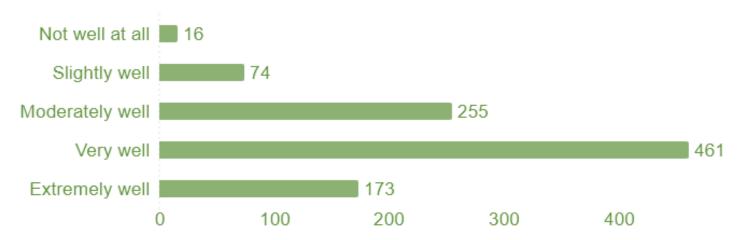


Q13 - How satisfied are you with our customer service





Q7 - How well do you feel we are assisting you in meeting your personal health and fitness goals?





Q12 - How satisfied are you with the cleanliness of our facility

