

Town of Galway Comprehensive Plan  
Community Survey



# Galway

Preserve what's important,  
plan for the future.

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1. **How do you identify yourself?**

- Male
- Female
- Other \_\_\_\_\_

2. **What is your age?\***

- |                                |                             |                             |
|--------------------------------|-----------------------------|-----------------------------|
| <input type="radio"/> Under 10 | <input type="radio"/> 31-40 | <input type="radio"/> 61-70 |
| <input type="radio"/> 11-20    | <input type="radio"/> 41-50 | <input type="radio"/> 71-80 |
| <input type="radio"/> 21-30    | <input type="radio"/> 51-60 | <input type="radio"/> 80+   |

3. **Where do you live in Galway?\***

- |   |   |
|---|---|
| <input type="radio"/> Village of Galway | <input type="radio"/> I do not live in Galway |
| <input type="radio"/> Town of Galway    | <input type="radio"/> Other _____             |
| <input type="radio"/> Galway Lake       |   |

4. **Do you belong to the Galway Lake Association?\***

- Yes
- No

5. **Do you own or rent your Galway home? (Check all that apply)\***

- Own
- Rent
- Landlord with property in Galway
- Not applicable

6. **Is this a second home?\***

- Yes
- No

7. **How long have you lived in Galway?\***

- |   |                                   |   |
|---|-----------------------------------|---|
| <input type="radio"/> Less than 5 years | <input type="radio"/> 21-30 years | <input type="radio"/> 50+ years               |
| <input type="radio"/> 5-10 years        | <input type="radio"/> 31-40 years | <input type="radio"/> I do not live in Galway |
| <input type="radio"/> 11-20 years       | <input type="radio"/> 41-50 years |   |

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**8. Do you have a student(s) within Galway Central School District?\***

- Yes, my kid(s) attend Galway Central School
- I have grandchildren who attend
- No, I don't have a student
- No, my student(s) attend(s): \_\_\_\_\_
- Other \_\_\_\_\_

**9. What do you do for work?\***

- I'm retired
- I work from home
- I work for a business in Galway
- I own a business in Galway
- I own a business outside of Galway
- I work for a business/company outside of Galway, which I commute to

**10. What is your favorite part about working in Galway?**

➤ \_\_\_\_\_  
\_\_\_\_\_

**11. What do you like least about working in Galway?**

➤ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**12. What is your favorite part about living in Galway?**

➤ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**13. What do you like least about living in Galway?**

➤ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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14. **What improvements would you like to see in the Town over the next ten years? (Check all that apply)\***

- |  |   |
|--|---|
| <input type="checkbox"/> More housing options<br>(including senior housing)                                    | <input type="checkbox"/> Better emergency services<br>(Fire/EMS)  |
| <input type="checkbox"/> More town-wide festivals  | <input type="checkbox"/> Park improvements  |
| <input type="checkbox"/> More small businesses (i.e.,<br>Breweries/wineries, outdoor<br>recreation businesses) | <input type="checkbox"/> Farmers Market/Stand   |
| <input type="checkbox"/> More restaurants  | <input type="checkbox"/> Community Garden   |
| <input type="checkbox"/> More shops  | <input type="checkbox"/> Agritourism (i.e., U-pick<br>operations, educational farm<br>experiences, Farm B&Bs) |
| <input type="checkbox"/> Restored vacant housing   | <input type="checkbox"/> I don't think the Town needs<br>any improvements                                     |
| <input type="checkbox"/> A designated Kid center   | <input type="checkbox"/> Other _____  |
| <input type="checkbox"/> Gathering Spaces  |   |

15. **In 2-3 words, what do you think the Town should prioritize?\***

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16. **What infrastructure improvements would you like to see? (Check all that apply)\***

- More sidewalks
- Better traffic management (speed limit changes, road maintenance)
- Light posts
- Traffic Lights
- None
- Other \_\_\_\_\_

17. **Do you follow Town of Galway on social media? (Check all that apply)**

- Yes
- No
- I would like the Town to post on more platforms (Instagram, BlueSky, X, etc.)

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18. What is the best way for the Town to communicate with you?

- Social Media posts
- Text messages
- Email
- Mail
- Town Calendar
- Other \_\_\_\_\_

19. How likely are you to recommend Galway as a place to visit or live?\*

- Not very likely
- Not likely
- Neutral
- Likely
- Very likely

20. What types of volunteer opportunities would interest you? (Check all that apply)

- Community events and festivals
- Civic/Local Government
- Environmental projects
- Youth programs and mentoring
- Agricultural or farm-related programs
- Food security
- Senior support programs
- Beautification projects (gardens, public spaces)
- Emergency services or public safety support
- I am not interested in volunteering
- Other \_\_\_\_\_