



# We want to hear from YOU!

Please fill out the following survey, and either:

a) Take a photo and submit to: **info@lakeambassadors.ca**

b) Mail completed survey page to: **PO Box 601 Invermere, BC V0A 1K0**

Your voice matters and we value your feedback. Thank you!

Y / N / Somewhat    I was familiar with the Lake Windermere Management Plan before reading this document.

Y / N / Somewhat    This document helped clarify the recommendations included in the LWMP for me.

Y / N / Somewhat    This document helped clarify the roles and responsibilities of local government and the Lake Windermere Ambassadors in implementing the LWMP.

Which aspect of lake management matters most to you? (*Circle one*)

Environment    Upland Mgmt    Foreshore Mgmt    Winter Use    Boating    Public Access    In-Water structures

Y / N    I have interests, skills or assets that I think could be useful and I would be willing to contribute to help with implementation of the LWMP guidelines. *If you answered "Y" please specify:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any other comments you wish to make about the LWMP or this Report Card?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes! I would like to learn more about the Lake Windermere Ambassadors. Please sign my email up for your e-newsletter

**Contact Info (optional):**  
Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Demographics (check all boxes that apply)**

- Full-time resident     Seasonal resident
- Circle age group: Under 18, 18-30, 31-40, 41-50, 51-60, Over 60
- Student     Employed     Retired

**Favourite use of the lake (check all that apply):**

- Paddling     Boating     Sailing     Swimming
- Fishing/Ice Fishing     Public beaches     Ice skating
- Waterskiing/wakeboarding     XC-Skiing/Skate-skiing

*All responses will be kept confidential.*