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Marketing plan for Far West Wheelchair Athletic Association

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**MARKETING PLAN FOR
FAR WEST WHEELCHAIR ATHLETIC ASSOCIATION**

A Project Report

Presented to

The Faculty of the Department of Human Performance

San Jose State University

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

by

Lauri Yarwasky

August 1998

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ABSTRACT

MARKETING PLAN FOR FAR WEST WHEELCHAIR ATHLETIC ASSOCIATION

by Lauri Yarwasky

Over 40 million people in the United States have disabilities (Bedini & McCann, 1992). Wheelchair sport positively affects the respiratory and cardiopulmonary health of people with spinal cord injuries and people with amputations (Asayama et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et al., 1982; Okuma, Ogata, & Hatada, 1989; Veeger, Hadj Yahmed, Van der Woude, & Charpentier, 1991; Zwiren & Bar-Or, 1975). The FWWAA provides competitive sport opportunities for people with physical disabilities. Declining membership in the FWWAA allows for fewer competitive wheelchair sport opportunities for members. One way to increase awareness of the activities and services of an organization is through marketing. A marketing plan creates an outline for an organization to follow in the marketing process. Therefore, the purpose of this project was to create and evaluate a marketing plan that will increase the membership of the FWWAA. The plan was evaluated, using a 5 point Likert-type scale (1= Strongly Disagree; 5= Strongly Agree), by members of the professional and target market populations. Overall mean scores of 4.4 and 4.5 were calculated from the two populations, respectively. Recommendations were made to include future contact with agencies and new members. The plan was considered successful.

Acknowledgments

I would like to dedicate this project to my husband Stan. Thank you for your support, love and endless patience. Most of all thank you for your friendship.

I would also like to thank my mother, just for being there, and the friends and family who remained friends and family during my long scholastic endeavor.

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Chapter 1

Introduction

Over 40 million people in the United States have disabilities (Bedini & McCann, 1992). Included in this population are approximately 200,000 to 500,000 people with spinal cord injuries and approximately 875,000 with limb amputations (Sherrill, 1993). The average age of onset of these disabilities is between 16 and 30 years old and 12 to 21 years old, respectively (Sherrill, 1993). The average life span after a spinal cord injury (SCI) is 10.5 years, excluding suicide (Wells & Hooker, 1990).

People with disabilities may experience decreased self-esteem/concept, pressure sores, weight gain, depression, and fatigue as a result of a disability (Lockette & Keyes, 1994; Sherrill, 1993). In addition to these problems, a person with a physical disability can spend 15 times the amount of energy coping with the presence of architectural barriers as a person without a disability (Sherrill, 1993).

People with amputations and SCI also experience problems specific to their disability. Upper and/or lower limbs may be amputated for different reasons. Lower limb amputations may occur at a rate of four to one compared to upper limb amputations. Amputations can occur due to birth defects, trauma or disease. A birth defect that causes a malformation of a limb may be severe enough to necessitate amputation. If a limb is malformed to the point of uselessness, amputation and the use of a prosthesis may be more beneficial for the patient (Lockette & Keyes, 1994; Miller, 1995; Sherrill, 1993).

Amputations due to trauma can be the result of accidents with vehicles, power tools, farm equipment, or any other accident. Amputations may also be the result of disease such as cancer or gangrene. Problems associated with amputations include

difficulties with balance, skin sores from prostheses, poor spinal alignment, and decreased range of motion (Lockette & Keyes, 1994; Miller, 1995; Sherrill, 1993).

Spinal cord injuries (SCI) result in lesions to the spine that can cause full or partial paralysis. Lesions occur between the cervical (neck) and sacral (tailbone) regions of the spine. Lower lesions (sacral) do not cause as much loss of muscle function as lesions to the neck. Different problems are associated with the different levels of lesion. A lesion in the sacral or lumbar area may cause paraplegia and the person may not be able to walk. If this occurs, the person may experience sores, and circulatory problems in the lower limbs. A lesion in the long part of the spinal cord (thoracic region) may cause sores, difficulties with respiration, circulation, urination, defecation and temperature control. A lesion in the neck may cause the above problems in addition to an inability to move the fingers, or hands, and possibly the inability to breathe independently (Sherrill, 1993).

The leading causes of death among people with SCI are cardiovascular and respiratory related (Wells & Hooker, 1990). Studies have shown that exercise can have a positive effect on the cardiovascular and respiratory systems of an individual with an amputation or paraplegia (Asayama et al., 1985; Davis & Shephard, 1988; DiCarlo, Supp, & Taylor, 1983; Gass, Camp, Davis, Eager, & Grout, 1981; Gass & Camp, 1987; Nilsson, Staff, & Pruett, 1975; Pachalski & Mekarski, 1980; Zwiren & Bar-Or, 1975). Research comparing the cardiovascular and respiratory functioning of athletic and non-athletic people with SCI or amputations has shown similar results (Asayama et al., 1985; Davis & Shephard, 1988; Okuma, Ogata, & Hatada, 1989). Participation in wheelchair sport has demonstrated the same benefits to a greater degree (Asayama et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et al., 1982; Okuma et

al., 1989; Veeger, Hadj Yahmed, Van der Woude, & Charpentier, 1991; Zwiren & Bar-Or, 1975).

People with SCI and amputations have also demonstrated improvements in mobility and independence, posture, self-esteem/concept, endurance, and activities of daily living as a result of physical activity (Miller, 1995). People with amputations can experience decreased blood pressure and heart rate, increased stroke volume, circulation and muscle endurance, and improved cardiac output as a result of physical activity (Lockette & Keyes, 1994). Participation in wheelchair sport is one way for people with disabilities to receive these benefits (Asayama et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et al., 1982; Okuma et al., 1989; Veeger et al., 1991; Zwiren & Bar-Or, 1975).

Wheelchair sport began shortly after WWII. It was used as a form of rehabilitation for veterans who were injured during the war. It exists today as a multi-organizational institution that provides sport opportunities and competition at international, national, regional and local levels (DePauw & Gavron, 1995).

Wheelchair Sports, USA (WSUSA) is one disability sport organization (DSO) available for people who use wheelchairs. The Far West Wheelchair Athletic Association (FWWAA) is the regional affiliate of WSUSA. Established in 1969, Far West was created to provide sport opportunities for people with SCI or amputations residing in California, Nevada, or Arizona. Members of Far West are invited to compete in local and regional competitions. Competitors meeting qualifying standards at sanctioned events may compete in national and international meets. The FWWAA also conducts developmental camps and sports clinics to educate people with physical disabilities about different

wheelchair sports. Day camps for children, 5 to 18 years old, are held throughout the region every summer to allow children to develop their wheelchair sport skills.

Significance of the Project

One focus of the FWWAA is to educate people with SCI and amputations about wheelchair sport. At one time, there were as many as 300 members in the FWWAA. Currently, there are 109 members. Since members compete with and encourage one another, an increase in membership will provide greater opportunities for competition and skill development. Brasile, Kleiber, and Harnisch, (1991) identified skill development as one of the main reasons people participate in wheelchair sport. An increase in membership will also allow more people with SCI and amputations to receive the benefits of physical activity. A current objective of the FWWAA is to increase awareness of the activities and services provided to current and potential members.

One way to make people aware of the activities and services of an organization is through marketing. The goal of marketing is to convince the consumer to choose the product or service being marketed over that of a competing product (Rudos, 1983). Marketing a product, service or organization involves determining what a target population wants and delivering that product (Randall, 1993). Some definitions also include an exchange between the product provider and the consumer (Kotler, 1986). The exchange could consist of a product for a certain amount of profit (Kotler, 1986; Randall, 1993).

A marketing plan creates an outline for an organization to follow in the marketing process. Components of a marketing plan include examining the business environment that currently exists, determining the wants of the target population, assessing the current

status of the product according to the desires of the population, evaluating the competition, identifying potential weaknesses or obstacles impeding the success of the product, identifying the strengths and opportunities available to enhance the product, delivering the product to the consumer, and evaluating the success of the product and the marketing plan. A well designed marketing plan creates focus and direction for the effective delivery of a product or service (Kotler, 1986; Luther, 1992; McDonald, 1993).

Purpose

The purpose of this project was to create a marketing plan that will potentially increase the membership of the FWWAA through heightened awareness of its programs and services to potential members.

Hypothesis

1. The marketing plan will be considered effective by marketing and wheelchair sport professionals and members of the target market as evidenced by evaluation scores of 3.5 or higher.

Delimitations for the Project

The following delimitations were identified for this project:

1. Athletes with spinal cord injuries and limb amputations were targeted.
2. Coaches of wheelchair athletes and referees of wheelchair sports were targeted.
3. People in a limited area of the FWWAA (Santa Clara, San Mateo, San Francisco, Contra Costa, San Joaquin, and Alameda counties) were targeted.
4. Agencies working with people with SCI and amputations were selected as the promotional agencies.

5. Targeted populations with exposure to chosen promotional agencies were influenced.
6. Free or low cost promotional tactics were employed.

Delimitations for Evaluations of Project

The following delimitations were identified for the purpose of the evaluation of this project:

1. Ten marketing professionals were selected to evaluate the potential effectiveness of the marketing plan.
2. Ten members of the target audience were selected to evaluate the potential effectiveness of the plan.
3. An evaluation form was adapted from existing research.
4. Evaluators were given 2 weeks to complete the evaluation.

Limitations of Project

The following were identified as possible limitations of this project.

1. Dedication of professionals at promotional agencies to evaluate the project will influence the effectiveness of the plan.
2. All members of the target population may not be in contact with selected promotional agencies.
3. The FWWAA currently has no marketing budget.
4. Limited historical information exists of previous attempts to market FWWAA to potential members.

5. Active support and involvement from current board members are limited to their attendance at periodic board meetings. This limits the amount of input from the people at the highest level of the organization.

Limitations of Evaluation of Project

The following were identified as possible limitations for the evaluation of this project:

1. Selected marketing professionals may not be familiar with nonprofit disability sport organizations.
2. Two weeks may not be enough time for selected professionals to thoroughly evaluate the marketing plan.
3. The motivation of the evaluators may influence their evaluation.

Definitions and Operational Definitions

The following definitions are offered for clarity:

Athlete. An athlete is any person who participates in sports regardless of skill level.

Disability Sport Organization. A disability sport organization is an organization that provides sport opportunities for people with specific disabilities.

Member. A person is a member of the FWWAA when they have completed a registration form and paid annual membership dues.

Summary

Over 40 million people in the United States have disabilities (Bedini & McCann, 1992). Wheelchair sport has positive effects on the respiratory and cardiopulmonary health of people with spinal cord injuries and people with amputations (Asayama et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et

al., 1982; Okuma et al., 1989; Veeger et al., 1991; Zwiren & Bar-Or, 1975). Potential skill development motivates people with disabilities to participate in wheelchair sport (Brasile et al., 1991). The FWWAA provides opportunities for people with physical disabilities to improve their skills through competition and education. The potential for the FWWAA to provide wheelchair sport training opportunities has decreased due to a decline in membership. A current objective of the FWWAA is to increase awareness of the activities and services provided for its membership. One way to make people aware of the activities and services of an organization is through marketing. A marketing plan creates an outline for an organization to follow in the marketing process. Therefore, the purpose of this project was to create a marketing plan that will potentially increase the membership of the Far West Wheelchair Athletic Association through heightened awareness of its programs and services to potential members.

Chapter 2

Literature Review

The purpose of this project is to create and implement a marketing plan that will increase membership in a disability sport organization. The first section of the review examines literature regarding sport marketing. Differences between marketing sport and a product will be outlined in this section. The following section examines literature published in the area of disability sport marketing, specifically, wheelchair sport. The third section examines techniques used to increase membership in health clubs and sport organizations. The final section reviews marketing plan workbooks. A summary will conclude the chapter.

Sport marketing

Differences exist between marketing a product and marketing sport. The following section will examine aspects unique to sport marketing that are critical to a successful marketing plan.

Sutton (1991) identified several major differences between marketing a product and marketing sport. One difference is that sport is not a tangible item. A consumer cannot walk away holding a sport in his/her hand. Sport is also very unpredictable. A sport marketer cannot guarantee that a team will have a winning season. This means that the product cannot be guaranteed from season to season or even from game to game. Players may change due to injury, contract negotiations or performance during a previous game. The life of sport is limited. Each sporting event must be sold within a limited period of time. Each game is a product that cannot be sold once the game has been played. Sport has a social nature. People generally watch sporting events with other

people. This may change the target audience from individuals to groups. Finally, the sport marketer does not have control over the product. There are many factors relating to sport that are decided outside of the marketing department which the marketer has to account for in the marketing plan.

Additional factors listed as unique to sport marketing were discussed by Mullin, Hardy, and Sutton in 1993. One unique difference is the distinction between marketing sport as a product and marketing products related to sport. In the case of sport, sport is the core product. Since it is neither a tangible or predictable product, the peripheral products are easier to market. The paraphernalia associated with professional sporting teams such as posters, hats, clothing, and other tangible goods become the marketable products.

Another distinction of sport marketing is the relationship between market competitors. Sport organizations compete for fan loyalty and money, but they must work together (compete) to draw the fans. The sports fans (target audience) themselves represent another unique aspect of sport marketing. The sport fan possesses characteristics that make marketing challenging. They can be unpredictable. 'Fair weather fans' may not support the team under adverse circumstances. Spectators may attend events for different reasons. Individual fans may attend purely because of an interest in the game. Group fans may be there for the social aspect of sport. The necessity to market to groups as well as individuals is a challenging part of sport marketing. Sport consumers often consider themselves experts in the field. This makes the marketing strategy different from products about which consumers may not consider themselves experts. Another sport marketing distinction is the existence of interested sponsors. Sport possesses the

thrill of the media which makes sport marketing different from product marketing. The sizable viewing audience of sport events makes it attractive to sponsors. Income generated by indirect sources of income, such as television, is greater for sports than for non-sport products. This limits the amount of money necessary to market the game itself.

Callecod and Stotlar (1990) discussed some of these same issues related above. They, too, pointed out that marketing sport is unique due to the perishable and unpredictable nature of the product. A team can win or lose any game or season. They also discussed the diversity of interest apparent in the target market. The target market may be there for social reasons, or to watch the game. Marketing strategy may change according to the success of an individual season. An important difference illustrated by Callecot and Stotlar is the value of market research. Market research needs to be conducted to determine the needs of the target audience before constructing a marketing plan. Knowledge of the target population is vital to any marketing plan. Offering a product or service to an uninterested population will negate the success of the plan.

In a demonstration of the importance of knowing the target population, Hofacre and Burman (1992) explained how changes occurring in the population of the United States as the twenty-first century approaches will affect future sport marketing approaches. Major changes were identified as the growth and increase in wealth of the aging population, the rapid growth of the Asian American and Mexican American populations, the increase in number of households with women as the head, and the increase in spendable income in the average US household, particularly Mexican American and aging populations. Dealing with these changes will be challenging for the sport marketer due to the different interests of the aging population. The wealthy aging are

more interested in golf and tennis than they were when they were younger. Their interests have turned to consumption of the arts rather than sport. Marketing sport to an aging population will require a new approach. Hispanic American and Asian American populations are new to the marketer due their recent growth. Knowledge of the culture of these populations is imperative to successfully market to this segment. A particular problem among the Asian American population is the existence of many different nationalities. Learning languages and cultures specific to these nationalities will require extensive market research. The change in family structure will require a special marketing tactic toward the busier family with one parent (more often a female parent). The single parent is busier and left dealing with decision making and transportation responsibilities. The sport marketer will need to employ various marketing techniques to keep up with the growth of so many populations. These techniques will be dictated by the results of extensive market research.

The comparison of sport marketing strategies used by the United States (US) and Australia, as illustrated by Shilbury in 1989, demonstrates some of the aforementioned distinctions and their relevance in successful sport marketing. With respect to the target market, US and Australia experience similar markets. The target populations of sport marketing believe that careers in sports are not difficult. They believe that they could either coach or play as well as those in the profession with a little practice. The US is stronger than Australia in marketing around the unpredictability of sport. The US concentrated on marketing products related to sport rather than sport itself. This created a new and more stable product for the US sport industry to market. Australia began this strategy in 1977 but Shilbury believes it is a strength of the US sport marketing strategy.

Another strength of the United States is the creation of marketing departments in major league sport organizations. The organization has more control over the marketing strategies when the department is located within the organization. The use of television in the US was a tremendous benefit to marketing departments. This created a unique relationship with business that gave sport marketing organizations an enormous advantage. Another strength of the United States sport marketing programs over that of Australia is the physical deployment of major league sport organizations. The US does not have more than two major league teams of one game in any city. This creates a demand and does not saturate the market in any city. Australia has a professional league with 14 teams, ten of which are in one city. This creates a division of loyalty to any specific team in the city. Also, people in other cities are less likely to claim ownership and dedicate themselves to a team in another city. This saturates the market in the one city, and people in other cities do not have a team to call their own.

The following sport marketing strategies outlined by Sutton (1991) elicited positive results. P. T. Barnum was a promoter who invited an unknown foreign singer to perform in the United States. He created an awareness and demand for concert tickets by creating a newsletter about the singer, holding a contest for lyric writing and building her up on her charitable contributions. The concerts were a success. Bill Veeck Jr. was a successful sport marketer. His accomplishments included the use of associating an event with every game. This meant that fans would attend sporting events even if the team was in a losing streak. Mondays one event or promotion was offered and Tuesdays something else was promoted. Promotional advertisements were his specialty. He would announce a promotion and provide an additional surprise event at the game. One of his promotional

events was the clean up of the stadium where the ball team played. Veeck hired people to clean and paint the stadium at night. He attracted attention to this event by leaving the stadium lights on during the night while the crew cleaned. This created a curiosity among spectators in the city. Attendance was up during the next game. A third promoter (Spalding) used his own fame and position to create a market for his products. He named his products the official products of major league organizations. These three promoters employed unique marketing strategies to create awareness of their product.

Motivation

Getting to know the target audience includes knowing what motivates them to participate in the activities offered by the organization. In 1987, Grimes and French examined perceived barriers to women for participation in sports. Women with disabilities face twice the barriers as men with disabilities. Women are encouraged to participate in sport less than men. Women with disabilities are encouraged less than women without disabilities. Six items were identified that make it difficult to motivate women with disabilities to participate in sport. Lack of encouragement as children is the initial difficulty women encounter in entering the field of sport. Training and availability of after school programs for girls or women is a second item. A third reason it is difficult to motivate women to participate in sport is that they are often not interested enough to overcome these barriers to want to participate. This could be due to the lack of knowledgeable trainers and coaches available to girls and women. The fifth reason is the shortage of equipment. Finally, the sixth reason is that there are not many role models to encourage women to participate. The passage of Title IX and the ADA has brought attention to the difficulties of women and people with disabilities. These barriers still exist

and need to be recognized in order to effectively market to the female half of the population.

In 1991, Brasile, Kleiber and Harnisch conducted a comparison study of reasons athletes with and without disabilities participate in sport. They administered the Participation Reasons Scale to 158 athletes with disabilities and 116 able-bodied athletes in basketball and track and field. The Participation Reasons Scale is a 26 item self-reporting survey using a 5 point Likert-scale to measure reasons people participate in sport. The authors found significant similarities among the groups. Both groups listed the same two items as most important. These were items associated with opportunities for skill development. The groups also listed the same three items as being least important. These were items related to competition and socialization. The athletes in this study did not feel that competition was the most important reason to participate in sports.

In another study, the Participation Reasons Scale was employed to compare participation motivation between adult and youth athletes with disabilities. In 1991, Brasile and Hedrick surveyed 104 youth and 88 adult male and female wheelchair basketball players. As in the previous study, both groups found items associated with improving their skills to be the most important reasons for participation. While both groups listed pleasing others and getting rewards as least important, they were in different order. The study also revealed differences the value placed by adults and youth on the social aspect of sport. Youth indicated a higher value on socialization than adults.

Disability Sport Marketing

The following section examines disability sport marketing. Two examples are given of how to market sport for people with disabilities at a community level. Both of the examples are from Canadian organizations.

Lefebvre (1992) outlined a method used in Canada to market recreational sport opportunities for people with disabilities. The first step was to reach the target population. This was done through an extensive promotional campaign that featured positive role models of people with disabilities. The campaign then went into the community to educate citizens about people with disabilities. The ongoing education of the community included regular meetings of a newly formed committee. The committee was made up of recreational organization personnel, a representative from each of the disability sport organizations and someone from the local region. In addition to the committee, a disability training program was implemented for local and regional employees of the recreation association. The final step was to perceive plans on a community-wide scale as opposed to a local activity or recreation center level. By employing these strategies, the Canadian organization was able to develop a working relationship between the personnel of the recreation centers for the able-bodied and the centers for people with disabilities. By working together, the two agencies were able to establish ways to best meet the needs of both populations. This also increased the number of centers available to each population. Secondly, local organizations worked together to create and promote group facilities in a specific area that would be accessible to people with disabilities. The 16 regionally located organizations were able to reach out to 500 local organizations and increase the target population reached. From this beginning came

the development of an agency that coordinated efforts of smaller, local organizations, allowing each organization to have greater resources and a stronger establishment.

In a similar discussion, Lyons (1993) suggested five steps to reinstating recreation programs for athletes with disabilities in Canada. Instituting a referral relationship between the rehabilitation and recreation centers is the first step. If people do not know about the center, they cannot take advantage of what it has to offer. The second step is educating patients during the rehabilitation process regarding community recreational opportunities. The third step involves teaching interested individuals the sports skills necessary for participation. Using a wheelchair does not automatically give a person the skills to play wheelchair basketball or tennis. A fourth step is establishing a system of support including transportation to the recreation center or scholarships for required fees. Also, the establishment of a buddy system offers support for people wanting to participate in recreational activities. A final step is encouraging the involvement of recreation centers in the redevelopment process. Each center needs to compose and adopt a mission statement that reflects their policies. A network of referral resources needs to be established as well. Family members, personnel at rehabilitation centers, occupational therapists, physical therapists and recreation therapists all need to be aware of and inform their patients of recreational opportunities in the community. Creating a working network allows more people to be informed and involved.

Membership Marketing

Increasing membership is an important part of marketing certain sport organizations. The following section examines literature regarding membership marketing.

Fullerton and Dodge (1995) conducted a survey of 663 golfers to determine if enough differences existed among one market group (golfers) to warrant different marketing strategies for its members. Based on demographics, skill level, and the buying habits of the respondents, Fullerton and Dodge found five distinct market segments among the participants surveyed. This allows for the creation of specific marketing campaigns targeted at the various segments. This approach will be more likely to elicit greater success than applying the same strategy to different target groups. One of the values of this approach is that it will allow the marketer to identify participants who may be on a border between degrees of dedication. A well designed campaign may encourage a participant to move up to the next level, which would more than likely increase buying power and time on the course.

A similar study by Nowell (1995) examined female golf participants and spectators. They found differences in participants as did Fullerton and Dodge (1995) in the above study. This allows for the creation of specific market strategies according to the reasons people participate.

In a study of triathletes, Chang and Johnson (1995) examined what makes people members of the Triathlon Association. After conducting initial personal interviews, surveys were developed to determine the benefits most valued by current members. The two page survey was completed by 307 members of the Triathlon New South Wales. Six aspects of membership were examined and a conjoint analysis was used to determine the value of each aspect among members. This survey demonstrated the existence of four separate groups participating in triathlons. As in the above studies, this is indicative of a need for four distinct marketing strategies. The creation of custom membership packages

was suggested. This would assure each group member of receiving the most appropriate package. The creation of individually designed membership packages may promote membership and be more enticing to those unsatisfied with a standard membership package.

Success of this technique is illustrated in a recreational facility in Chicago. Schmid (1993) reported on a health club facility that employed a unique pricing system as a way of attracting and keeping members. The system allowed members to pick the portion of the club they thought they would use most and pay only for that facility. Members could choose anywhere between paying for just one facility and paying for use of the entire club. The club also allowed members to pay on a day to day, week to week, month to month, or year to year basis. By using this method of membership structuring, the club has exceeded its original membership goal by more than ten percent. Memberships also were high enough for the club to cover 100% of its operating costs. These goals were met during the first year the club was open. Although membership continues to grow, the current focus of the club is to retain current members rather than recruit new ones.

Developing a marketing plan

An effective marketing plan may be different according to the type of product or organization being marketed. The following section examines marketing plan development strategies for a variety of sport and health club organizations. Included in this section are marketing plan designs for general applications.

Weese (1986) designed a marketing plan for intramural and recreational sport organizations. Budget, competing organizations and activities, and instability and changing trends of the target group were all listed as important reasons for intramural

organizations to develop strong marketing plans. The marketing plan outlined here consists of six parts. Determining the philosophy of the program is the first. The second step is to define the target audience and ascertain their needs. A marketing plan will not be effective if the needs of the target audience are not considered. The third and fourth steps involve the employment of the SWOT (Strengths, Weaknesses, Opportunities and Threats) method of marketing both within and outside of the community, respectively. SWOT involves the determination of the organizations strengths, weaknesses, opportunities, and threats in the market place. Step three analyzes the organization within the target community and step four analyzes the organization as it compares to market competition. The fifth step is determining the way the plan will fall into place with respect to the product, how much it will cost, and how and where it will be promoted and offered. Weese lists the budget as the final step in the development of a marketing plan. An outline of a marketing plan developed by one school is provided.

Another sport organization membership marketing plan was presented by Peltz in 1986. Peltz discussed ways to increase membership by marketing a health or sport organization to corporations. The first step recommended is to evaluate the program being offered, to determine whether the programs are flexible to change if that is necessary for the target audience. The second step is to conduct a survey of current members to determine how they feel about the program. Learning the needs of the community outside the membership is the third step. The fourth step is to develop a product or program flexible enough to fit the needs of the target community and the needs of the organization. Group memberships, discounted fees, and personalized service are all suggested items that can be included in a package. Collecting background information on the clientele can be

accomplished using card files, letters, phone calls and personal meetings. Considerable time is required initially, but once the clients have joined, they spread word of the attributes of the program. Getting into the community personally is advantageous for the director of any organization. “Word of mouth” can occur from either end of the company. Members of an organization may not be the bosses in a company, but they can do as much to create new membership as the top person in the company. Being professional and organized when making visits to any organization is important.

A thorough presentation of a sport marketing strategy is discussed by Sutton (1991). Sutton uses a strategy of eight P’s to market sport. Product is the item or service being marketed. This includes the features, functions and benefits of the item. The second phase is strategic planning. This process includes determining the target audience, conducting market research on current members/participants and evaluating the strengths and weaknesses of the organization. The most effective forms of media to use can be determined using the results of the market research. Developing, implementing and evaluating a short term plan are the final steps of the strategic planning process. Steps three through six are determining the most effective ways to package, promote, price and place this product or service. Step seven, positioning, refers to how an organization wants to be perceived in the market place and billing itself as such. An organization can position itself as the only pine cone ball club in the country if they think that would be advantageous from a marketing standpoint. Perception is the final step of the eight step process. Perception is how the target market sees the organization. The reputation of the organization is reflective of its perception to the target population.

A marketing handbook for general use was created by McDonald in 1991. Adding two more steps to the process, McDonald described the ten S approach to marketing in the first section of the handbook. This approach suggested the importance of putting strategy before tactics, situating marketing within operations, sharing values about marketing, structuring around markets instead of function, scanning the environment, summarizing the information skillfully, being skillful and knowledgeable, systematizing the process, sequencing the objectives of the plan, and the value of style and culture. The second section discussed components of a marketing plan and provided tables and formulas illustrating how to calculate or determine a conclusion for each component. The following section provided blank tables and graphs for companies to use in constructing their own marketing plan. The final section gave examples of marketing plans and how they were created. A discussion of barriers to achievement of goals and objectives was presented. Knowledge of barriers and potential problems and methods of reducing them is an important part of a marketing plan. While some of the formulas may be challenging to use or understand, the ten S approach makes this a very valuable and employable resource for constructing a marketing plan.

Cohen (1987) also employed ten steps in developing a marketing plan. Situational analysis, description and investigation of target market, identification of potential problems and opportunities, development of the goals and objectives of the marketing plan, distinction and definitions of marketing strategies and marketing tactics, methods of execution and evaluation of the plan and a summary were included among these ten steps. A discussion of financial ratios and their importance were added, as are models of different marketing plans.

A third ten step approach was used by Lauer (1995). Lauer listed ten items necessary to create an effective marketing plan for a nonprofit agency. The items were designed around a team approach to marketing. Collaboration among the public relations, advertising, marketing and volunteer services departments was suggested as a way to give a company a total approach to marketing. The first step in this marketing strategy is the creation of a simple slogan that will identify the theme of the organization. The slogan should be associated with the name of the organization and should be easy to remember. The second step is a mass marketing type of approach. The purpose of this step is to get the name of the organization seen by as many people as possible. High visibility will generate recognition of the organization by people outside of the immediate target audience. The third step involves getting the attention of the target audience. This is accomplished by making a more direct and thorough marketing effort toward people important to the establishment and enhancement of the organization. Members of this group include possible donors, officials, participants, and customers of the company. Once the organization has the attention of several of these key members, it is time to establish company objectives that will create employee buy-in to the marketing plan. An objective should be established that will create interest and a challenge for employees to fulfill. The next items are related to employee buy-in. Making marketing plans a part of orientation and forming teams are ways to create an effective marketing program in which employees can take an interest. A third method of involving employees in the marketing process is through the identification of personnel at the top of their field of expertise. Together with expert personnel from other areas a task force can be developed to create and execute a marketing plan. A group of volunteers needs to be assembled to aide the

task force in carrying out their plan. Volunteers can exist in greater numbers and have skills that may be helpful in bringing the plan to fruition. Conducting a fund-raiser is the next step. The final step is bringing together all the components of the marketing campaign.

In a general application format, Luther (1992), suggested making a "fact book" before developing a marketing plan. The fact book contains all the information Luther believed was necessary to know about the target before an effective marketing plan can be constructed. The book is divided into sections containing information on opportunities available for marketing the product, investigating how the competitor will react to different marketing strategies, identifying the needs of the customer, and examining the strengths, weaknesses and position of the company in several key marketing facets. The marketing plan may be developed once the fact book is complete. Luther divided the marketing plan into seven parts. Each part suggests listing objectives and strategies to be employed to complete the marketing plan. The first section examines the company as a whole to determine the strategies to be employed, who will be involved in marketing the product/service, a synopsis of the information in the fact book, the desired result of the marketing plan and, and the methods that will be used to accomplish the stated marketing objectives. Specific product or service objectives and strategies are discussed in the second section. The following sections suggest making specific plans for marketing communications, research, customer services, and sales management. The final section is allocated for the way the company intends to evaluate the plan. This plan is applicable for profit as well as non-profit companies and can be used to market either a product or service.

Summary

The literature reviewed in this chapter was divided into four sections. The first section examined the field of sport marketing. The second section reviewed literature related to disability sport marketing. The following section examined literature specific to membership marketing. A final section was included outlining various market planning templates.

Certain aspects of sport marketing are common to those of regular product marketing. Conducting market research to determine the needs of the target audience, the availability of like products in the market place, the position of the company in the current market, and developing or presenting products of value to the consumer are all aspects of product marketing that are shared by the sport marketing profession (Callecod & Stotlar, 1990; Mullin et al., 1993; Sutton, 1991).

Market research of people with disabilities indicates that the chance to improve their skills is an important reason why people with disabilities participate in sports (Brasile & Hedrick, 1991; Brasile et al., 1991). Grimes and French found six reasons why women with disabilities do not participate in sports. Lack of encouragement as children, role models, knowledgeable coaches and trainers, after school programs and equipment were listed among these reasons. The sixth reason is women with disabilities often lack the commitment it takes to overcome the above barriers (Grimes & French, 1991).

Unique to the field of sport marketing is the fans. The target audience is as unpredictable as the product of sport itself. Fans may come as individuals, or groups. They may come to every game, disregarding the success of the team during the current season, or they may be fair-weather fans who only show up during winning seasons. The

perishability of the sport product is another unique feature of the field. Sport is not a product that can be stocked on a shelf for days, weeks, or years. Once the game has been played, the sport product changes to the next game. Sport is a nebulous product. A consumer cannot take it home with them and keep it for long periods of time. For this reason, sport marketing also encompasses peripheral product marketing. Tangible products associated with sport such as hats, shirts, and posters are marketed as an extension of sport. One beneficial distinction of sport marketing is the attraction of the media. This feature makes marketing sport to sponsors a simpler task than marketing a product. Sponsors are encouraged to support sporting events due to the high visibility of sport through all media types (Callecod & Stotlar, 1990; Mullin et al., 1993; Sutton, 1991).

Membership marketing has been employed by various organizations with successful results (Chang & Johnson, 1995; Fullerton & Dodge, 1995; Nowell, 1995; Schmid, 1993). Membership marketing includes the creation of a choice of membership levels so people with different desires can take advantage of what the organization has to offer. This worked well with a health club in Chicago where memberships were almost individually designed to satisfy each participant. Members were able to get what they wanted most from the club and not have to pay for things they were not interested in or were not going to use. The pricing structure was developed according to how participants thought they were going to use the club. Memberships ranged from day passes to annual memberships (Schmid, 1993).

Disability sport organizations can market their programs by establishing relationships with rehabilitation centers. This can be done by sending role models to the

facilities to talk to the personnel. In addition to talking to the staff, an educational system needs to be established to inform those being rehabilitated of the opportunities that exist outside the facility. Education may also include teaching those with newly acquired disabilities how to play wheelchair sports. Involving family and friends in the educational process will make it a more comprehensive program. If the family is excited about the idea, enjoying the activity may be easier (Lefebvre, 1992; Lyons, 1993).

A marketing plan can take on several formats. There may be a different number of steps involved in each of the plans reviewed, but the basic information is the same. Most of the plans reviewed here consisted of determining the needs of the target audience, reviewing the current strengths and weaknesses of the organization, conducting market research to see who is currently participating in the program, determining a price for the product or service and a means of delivering the service to the customer. A final step is the evaluation of the plan (Cohen, 1987; Lauer, 1995; Luther, 1992; McDonald, 1991; Peltz, 1986; Sutton, 1991; Weese, 1986).

Chapter 3

Method

The purpose of this project was to create and evaluate a membership marketing plan for a local wheelchair sport organization. This chapter includes an outline of procedures, and a statement of the evaluation process. A summary is included at the end of this chapter.

Target Audience

The target audience of this marketing plan is individuals with spinal cord injuries or amputations who may become members in the Far West Wheelchair Athletic Association (FWWAA) as athletes, coaches, or officials. There is no age restriction for membership. Athletes must have a physical disability that requires the use of a wheelchair to participate in sports. Coaches or officials are not required to use wheelchairs to be members. Due to budgetary constraints, men and women living in selected Northern California counties will be targeted. Santa Clara, San Mateo, San Francisco, Contra Costa, San Joaquin, and Alameda counties have been selected because of population, proximity to the FWWAA regional office, and current number of participating members from these counties.

Target organizations include universities, junior colleges, community centers, rehabilitation centers, city park and recreation departments, hospitals, spinal cord injury support groups and current and former members.

Procedure

A marketing packet will be distributed to agencies in target counties. The packet will include a video of clips from the 1996 Atlanta Paralympic Games, a Wheelchair Sports, USA promotional video and brochure, and an introduction letter. Current Far

West Wheelchair Athletic Association athletes will participate as role models for the organization.

This marketing plan consists of three phases. The first phase will establish a working relationship with rehabilitation centers within the counties. This will be done by using the list of contacts within targeted agencies in selected counties. An introductory phone call will be made to each contact. After the phone call, the introductory packet will be mailed to the individuals at the participating organizations. A follow up phone call will be made to determine a meeting date to discuss the packets with each participant. A member athlete will participate in visits to the agencies. Membership forms will be left in their possession to promote the program to clients.

The second phase is to establish a relationship with potential members of the Association. This will be done in a manner similar to the one used in phase one. Spinal Cord Injury Support Groups in the target area have been identified. Contact will be made over the phone and initial visits will be arranged with the support group facilitator. Follow-up visits will be made to support groups with permission from the facilitator. Introductory materials will be distributed to potential members. A volunteer Far West athlete will be asked to participate in these visits as a role model for future athletes.

The third step will be to introduce those interested in wheelchair sports to the people involved in that particular sport. A person interested in swimming will be invited to meets, or practices of the swimming team. This is a way of informing potential members about what is involved in being a part of the United States Wheelchair Swimming Association. As a part of this phase, individual members of the participating sports will be identified as mentors for their program. One athlete from each sport will be

identified to introduce potential members to their sport and answer any questions they may have about membership and their sport.

Instrument

The completed marketing plan includes an informational section, a procedural section and the materials necessary to carry out the plan. The informational section contains background information on the FWWAA, Market Research describing reasons people with disabilities participate in wheelchair sports and budget information.

The procedural section includes step by step instructions of how to carry out the plan. The material section will contain lists, samples and promotional materials necessary to carry out the plan. The first list includes the names, addresses and phone numbers of contacts in selected promotional agencies. The second list includes the same information for the volunteer role model athletes from the FWWAA. The sample section includes a copy of a sample introduction letter, an outline of what to say to contacts when calling and a sample thank you letter. Videos and brochures listed in the procedure section above as well as membership forms are included in the promotional material section.

Evaluation

Evaluations were designed to measure the potential effectiveness of the plan. Evaluations were conducted by volunteer evaluators using the following procedures. Volunteers evaluating the project were given a distribution packet, a protocol of the plan, and a Likert-type questionnaire to rate their perception of the potential success of the plan. Volunteers were given two weeks to complete the evaluation (See Appendices A and B). After two weeks, a follow-up call was made to encourage the completion of the questionnaire.

The questionnaire was distributed to members of the target market as well as professionals in the fields of marketing and disability sport. There were ten evaluators in each group. One evaluator in the professional group is a marketing director of a national non-profit organization. A second evaluator is on the Board of Directors of a National Wheelchair Sport Organization. A third evaluator is on the junior committee for a National Wheelchair Sports Organization. Four evaluators were chosen from the field of marketing professionals in the selected counties. The remaining professional evaluators were chosen from a sample of people currently working in the field of wheelchair sports. They rated the plan in terms of potential usability by their department for their programs. A total of ten questionnaires and plans were distributed to professionals for evaluation.

The professional evaluators were chosen according to their qualifications in their field. They were interviewed by the author of the plan. Seven of these professionals were people unknown to the author prior to the selection process. This will reduce possible bias on the part of the evaluator. A follow-up phone call asking for return evaluations was made to evaluators who failed to meet the two week deadline.

Ten members of the target market were also chosen as evaluators. They were selected at random and seven of them were previously unknown to the author. The same protocol was followed as for the professional members.

The questionnaire is a five point Likert-type design with one representing strongly disagree and five representing strongly agree. The survey consists of nine marketing effectiveness items with space for comment after each item. The comment section was to assist the marketer in making improvements for future plans. An average score for each item was determined. A total score for all the items was obtained. The overall success of

the plan is determined by the mean of the total score. This is determined by adding up the average scores of all the items and dividing that by the total number of items on the questionnaire. A mean score of 3.5 or above is considered favorable. A mean score below 3.5 indicates that the plan needs to be revised according to suggestions from evaluators and reevaluated.

Summary

This chapter described the procedures used in conducting the proposed marketing plan. The plan is composed of a three step program developed to promote the Far West Wheelchair Athletic Association. The first step of the plan is to develop and distribute a promotional packet to key personnel in rehabilitation centers, universities, junior colleges, city park and recreation departments, hospitals, and community centers in selected counties.

The second step is to apply the same procedures above to potential members of the organization. This will be done through visits to appropriate support groups. The third step is to identify and connect members of current athletes in particular sports to those individuals interested in joining those sports. This will be a mentoring type of program so new members will feel they have a contact who is interested in their participation.

Finally, the plan was evaluated by experts in the field of marketing and disability sport, as well as potential members of the organization. They received a packet, a protocol of the plan and a Likert-type questionnaire rating the potential effectiveness of the program.

Chapter 4

Results

The purpose of this chapter is to show the results of the evaluation. A written section as well as printed tables of the results have been included. The results of the evaluation of this plan have been presented in this chapter.

Project Results

The final plan included three sections (See Appendix D). The first section was an informational section. The procedural section included step-by step instructions of how the plan was to be carried out. The final section was a sample section containing sample letters and outlines of phone call scripts.

Two evaluation questionnaires were developed. The first evaluation was geared toward professionals working in the field of marketing or wheelchair sport. The target market evaluation was designed to determine whether or not potential members of wheelchair sport thought the plan was effective. The evaluations contained nine questions each. Six of the questions were the same on both evaluations. This was done to allow comparison between the responses of each group.

Evaluators

The ten professional evaluators consisted of six females and four males representing a wide variety of disciplines within the marketing and wheelchair sport professions. Among the marketing professionals were marketing directors from a nation-wide non profit health organization and a professional sport team, an executive director of a sport marketing organization, a director of a national park and recreation marketing firm, and the vice president of the board of a national athletic association. Among the

wheelchair sport professionals were 2 physical therapists who are national classifiers in wheelchair sports, the executive director and chairman of the board of a national wheelchair sport organization, and the chair of a statewide wheelchair sport organization. Together, they have an average of twelve and a half years of experience in their respective fields.

The target market evaluators consisted of 7 men and 3 women with spinal cord injuries that occurred between 2 to 33 years ago. All of these respondents were people with spinal cord injuries. Six of the evaluators were familiar with the FWWAA and had participated in wheelchair sports, with three of those having previously been members. None of the evaluators were current members of the FWWAA.

Evaluation Results

The professional evaluators gave scores of Disagree Somewhat to Strongly Agree. On some items, the ratings went all the way from Disagree Somewhat to Strongly Agree. Only 2 items received a Disagree Somewhat score. These items had the lowest means among both population groups while still being over the mean to be considered successful. The target market had a higher range of scores ranging from Undecided to Strongly Agree (See Table 3).

Four questions related to the strength of the plan to attract new members to the organization (Items 1, 2, 3, & 5 See Tables 1 and 2). The two items related to simply attracting new members to the organization received positive comments (Items 1 and 2). The mean scores for these items for both groups were 4.6 and 4.7, respectively (See Tables 1 and 2).

Table 1

Professional evaluation results.

1. SD = Strongly disagree 2. DS = Disagree Somewhat 3. U = Undecided
 4. AS = Agree Somewhat 5. SA = Strongly agree NA = Not applicable

Item	1	2	3	4	5	NA	Mean	Standard Deviation
1. This plan will attract new members			1	1	8		4.8	.64
2. This plan can be used on a larger scale to attract members in the rest of the FWWAA region of California, Arizona and Nevada.				2	8		4.8	.24
3. This plan will attract members beyond an initial three month test period.		1	2	2	5		4.1	1.12
4. This plan is feasible within the budgetary constraints of the organization.				4	6		4.6	.52
5. This plan will attract long-term members.		1	2	3	4		4.0	1.05
6. This plan will increase the visibility of the organization.			2	3	5		4.3	.82
7. This plan will establish working relationships with key facilities/personnel in the area of wheelchair sports.				1	9		4.9	.32
8. This plan demonstrated a strong background knowledge of the target market.				4	6		4.6	.52
9. This plan demonstrated a working knowledge of key concepts in sport marketing.			2	5	3		4.2	.75

Table 2

Target market evaluation results

1. SD = Strongly disagree 2. DS = Disagree Somewhat 3. U = Undecided
 4. AS = Agree Somewhat 5. SA = Strongly agree NA = Not applicable

Item	1	2	3	4	5	NA	Mean	Standard Deviation
1. This plan will attract new members				6	4		4.4	.52
2. This plan can be used on a larger scale to attract members in the rest of the FWWAA region of California, Arizona and Nevada.				5	5		4.5	.53
3. This plan will attract members beyond an initial three month test period.			2	4	4		4.2	.79
4. The target market has respect for members of selected promotional facilities.			3	5	2		3.9	.74
5. This plan will attract long term members.			3	3	4		4.1	.88
6. This plan will increase the visibility of the organization.				1	9		4.9	.32
7. Selected facilities will reach a large population of the target market.			1	4	5		4.4	.70
8. This plan demonstrated a strong background knowledge of the target market.				3	7		4.7	.48
9. Members of the target market will respond positively to suggestions from members from selected facilities.			2	4	4		4.2	.79

Table 3

Comparison Table

1. SD = Strongly disagree 2. DS = Disagree Somewhat 3. U = Undecided
 4. AS = Agree Somewhat 5. SA = Strongly agree NA = Not applicable

Bold = Target market evaluators *Italic = Professional evaluators* Plain = Combined

Item	1	2	3	4	5	NA	Mean	Standard Deviation
1. This plan will attract new members				6 <i>1</i>	4 <i>8</i>		4.4 <i>4.8</i> 4.6	.52 <i>.64</i>
2. This plan can be used on a larger scale to attract members in the rest of the FWWAA region of California, Arizona and Nevada.				5 <i>2</i>	5 <i>8</i>		4.5 <i>4.8</i> 4.7	.53 <i>.24</i>
3. This plan will attract members beyond an initial three month test period.		<i>1</i>	2 <i>2</i>	4 <i>2</i>	4 <i>5</i>		4.2 <i>4.1</i> 4.2	.79 <i>1.12</i>
5. This plan will attract long term members.		<i>1</i>	3 <i>2</i>	3 <i>3</i>	4 <i>4</i>		4.1 <i>4.0</i> 4.1	.88 <i>1.05</i>
6. This plan will increase the visibility of the organization.			<i>2</i>	1 <i>3</i>	9 <i>5</i>		4.9 <i>4.3</i> 4.6	.32 <i>.82</i>
8. This plan demonstrated a strong background knowledge of the target market.				3 <i>4</i>	7 <i>6</i>		4.7 <i>4.6</i> 4.7	.48 <i>.52</i>

The Professional Evaluators alone, scored item 1 with a mean of 4.8. Ten percent were Undecided, 10% Agreed Somewhat, and the remaining 80% Strongly Agreed. For item 2, the professional group scores resulted in a mean of 4.8. Twenty percent Agreed Somewhat and the remaining 80% Strongly Agreed.

The Target Market evaluation means were lower for both items. Item 1 resulted in a mean of 4.4. Sixty percent of the target market evaluators Agreed Somewhat and the remaining 40% Strongly Agreed. The mean score for item 2 was 4.5. The evaluators scored 50% Agree Somewhat and 50% Strongly Agree.

Both the professional and the target market evaluator's comments for these items follows (See Appendix C). The design of the plan was well received. Including different media types for the presentation was a positive aspect. Also, more than one reviewer liked the idea of having athletes assist or make the presentation. The need for programs to exist near the athlete was another comment regarding attracting members. The target facilities were said to be geared toward newly injured people. This was noted as a good point as well as a concern. Newly injured people can receive a boost to their self-confidence if they know that there are activities they can participate in when they are ready. However, a suggestion was to follow-up with these people because they may not be ready to participate at the time they receive the information.

Other suggestions for attracting new members were to add schools to the target facility list to attract the younger group. This group was not included initially due to the low percentage rate of potential members in this area. The addition of promotional products and participation in trade shows was another suggestion. This was not included due to the budget of the organization. A final comment in regard to effectiveness of

attracting members was that aggressive follow-up is necessary for a successful plan. This can be done in the form of newsletters and mentor athlete contact.

The two items concerning long term membership (Items 3 and 5) were not as highly rated as the above mentioned items. Mean scores for these items for both groups were 4.2 and 4.1, respectively. The professional evaluations resulted in a mean score of 4.1 for item 3. Ten percent disagreed somewhat, 20% were undecided, 20% agreed somewhat, and the remaining 50% strongly agreed. The professional evaluations scored a mean of 4.0 for item 5. Ten percent disagreed somewhat, 20% were undecided, 30% agreed somewhat and 40% strongly agreed.

The target market evaluation means for item 3 was 4.2. Twenty percent were undecided, 40% agreed somewhat and 40% strongly agreed. The mean for item 5 among the target market was 4.1. Thirty percent were undecided, 30% agreed somewhat, and 40% strongly agreed.

Comments regarding this aspect of the plan were heavily focused on the consistency of follow-up contact with both the new athletes and the target agencies (See Appendix C). The other main comment was in regards to the quality of the programming that the athlete experiences. If they have good experiences and find that there are many programs they enjoy, they are more likely to continue their membership. If they join and do not find themselves using their membership, they will not continue. An additional comment was made with respect to highlighting the health and fitness benefits of membership in the organization. Not all people want to compete, but would be interested in the recreational aspects of membership.

One item (Item 8, See Tables 1 and 2) related to the knowledge of the target market evidenced in the plan. The mean score for this item for both groups was 4.7. The professional evaluations resulted in a mean score of 4.6. Forty percent agreed somewhat and 60% strongly agreed. The target market evaluations resulted in a mean score of 4.7. Thirty percent agreed somewhat and 70% strongly agreed.

Reviewers felt that a lot of research had been done and there was a sense of experience of working with the population (See Appendix C). A different reviewer felt there needed to be more information for the Amputee population. Helpful suggestions were made as to where to reach more members of this population. A comment was also included about the depth of understanding of the facilities involved in the plan. One target market evaluator remarked that it was still important to convince the able-bodied world of the abilities of people with disabilities.

The target market evaluations included two items relating to the amount of respect they have for the members of selected promotional facilities (Items 4 and 9, See Table 2). Surprisingly, these items received two of the lowest mean scores on the evaluation (3.9 and 4.2 respectively). For item 4, 30% were undecided, 50% agreed somewhat and 20% strongly agreed with the potential effectiveness of item 4. For item 9, 20% were undecided, 40% agreed somewhat and 40% strongly agreed.

While these scores are low, they are still over the average score to be considered successful. However, these results indicate a need to examine the comments of the target market and try to better this somehow, if possible. The comments received suggested that the respect of the facility personnel is beyond the control of the organization. The remaining comments were positive. The fact that a member athlete will be involved in the

recruitment process was again indicated as a strength of the plan. The continued connection with the people in the target facilities was also suggested a second time.

The remaining two items on the target market questionnaire related to increasing the visibility of the organization and reaching a large population of the target market (Items 6 and 7, See Table 2). The mean scores for these items were 4.9 and 4.4, respectively. Ten percent agreed somewhat and 90% strongly agreed with item 6. Ten percent were undecided, 40% agreed somewhat and 50% strongly agreed with item 7.

Comments in this category varied (See Appendix C). One comment was made that both able-bodied and people with disabilities will be reached. A second comment expressed concern that the information was too focused on paraplegics and left out the quadriplegic segment of the SCI population. The possibility of members bringing in new members themselves was seen as a positive effect of the plan. Again, the comment was made about follow-up relationships with facilities. The benefit of FWWAA as a resource for people with disabilities was mentioned as a positive aspect of the plan.

The professional evaluators were also asked to comment on the effectiveness of the plan to increase the visibility of the organization (Item 6, See table 1). This item received a mean score of 4.3. Twenty percent were undecided, 30% agreed somewhat and the remaining 50% strongly agreed. Concerns were raised that there was no advertising or public relations budget in the plan to achieve this goal (See Appendix C). The standard comments about the need for follow-up and quality programming were also included in these comments. A suggestion was made to host events that will attract media as a means of increasing the visibility of the organization.

The professional evaluators were asked to comment on the feasibility of the plan within the budgetary constraints of the organization (Item 4, See Table 1). This item received an average rating of 4.6. Forty percent agreed somewhat and 60% strongly agreed. The majority of comments for this item were that it was fine and within budget (See Appendix C). One concern was raised that the budget may change depending on the athlete making the contact. There may be a difference if a person calls the potential member or goes to visit them in person. The value of the in-kind materials was also noted as was the absence of a staff salary line item in the budget. Staff salary for this project is in-kind.

The potential effectiveness of the plan to establish working relationships with key facilities and personnel in wheelchair sports was also questioned (Item 7, see Table 1). The mean score for this item was 4.9. Ten percent agreed somewhat and 90% strongly agreed. This was seen as the strength of the plan by some of the evaluators (See Appendix C). Follow-up contact with facility personnel was again seen as important to the success of the plan. A suggestion was made to get the facility personnel together to share information. This is a valuable suggestion and will be added before the plan is put into motion.

The final item the professionals were asked to review was the depth of knowledge of sport marketing reflected in the plan (Item 9, see Table 1). The mean score for this item was 4.15. Twenty percent were undecided, 50% agreed somewhat, and 30% strongly agreed. The comments reflected good research and a good package to present (See Appendix C). One suggestion was not to limit the plan to people with SCI and amputations because there are many people with different disabilities who could benefit

from membership in the FWWAA. Other groups were not included specifically because there are other organizations who target different disability types. FWWAA will allow people with different disabilities to participate or compete in their events, but they should not market their organization to these populations as it would be unprofessional. Another comment was made to include the use of additional tools to reach the target groups. This was not expanded upon so cannot be follow-up. Two evaluators commented that they were not familiar specifically with sports marketing, but that the plan seemed to show knowledge of marketing concepts.

Summary

The hypothesis for this project was that it would be considered effective as shown by mean evaluation scores of 3.5 or higher. This was proven correct with average scores of 4.5 and 4.4 from the target market and the professional evaluators, respectively (See Tables 1 and 2). The target market gave higher individual ratings with a 3 being the lowest while the professional group gave a higher overall rating.

Several evaluators made comments about the items. Most of these were positive and helpful to improving the plan. Overall, the results of the questionnaire were positive for both groups of evaluators. The plan was considered to be successful with an average rating of 3.5 or higher on a 5 point Likert-type scale.

Chapter 5

Discussion Recommendations and Conclusion

This chapter contains conclusions and a discussion of the results of the evaluation as well as recommendations for improvements of the plan. Comments made on the evaluation forms are presented and discussed in this chapter.

Discussion

The evaluators of the plan took the time to make valuable comments and suggestions. There were few negative comments. Most of the comments were positive and the rest of the comments were in the form of suggestions. The comments have been presented in Chapter 4. The comments that were repeated throughout the evaluations will be discussed here.

One positive comment repeated in the evaluations was the benefit of having member athletes participate in the plan. This was intentionally included in the plan as a way to increase the validity of the plan. If an able-bodied person represents an organization for people with disabilities, there may be some question as to what other people with disabilities think of the organization. Credibility increases when a member of the target population speaks about what they gain from the organization. Knowledge of the research regarding benefits of exercise or wheelchair sports for people with disabilities does not compare to the spoken word of the person in the target population.

A second repeated comment in the evaluations was regarding the proximity of programs to interested athletes. Athletes will be more likely to compete or participate in events if they are reasonably close to where they live. Travel and the costs associated with it are discouraging to many interested athletes. People will be more likely to

become members and stay members if they feel the programs are a reasonable distance from their home. The Far West Wheelchair Athletic Association has participating chapters throughout the region. Chapters are pockets of activity in highly populated areas. These are places people can go to participate while not living in close proximity to the FWWAA regional office.

Another frequent comment was regarding the quality of programs of the organization. A person will be more likely to join, participate, and remain a member if they feel they are getting quality programs as part of their membership. Programs can be in the form of training clinics or workshops, recreational programs, or competitions. In order to give the participating members what they are looking for, it is necessary to keep in touch with them to find out what their needs are.

The final comment which received repetitive mention throughout the evaluations was about the need for follow-up with new members and members of the target facilities and the importance of follow-up to the success of the plan. People can lose enthusiasm for an idea if it is not brought to their attention at intervals of time. In addition to lost enthusiasm, there is the possibility of loss of personnel in the target facilities. Job stability is not a guaranteed factor. People lose or change jobs more than they used to. Making contact with one person in a facility does not guarantee continued promotion of a project or organization.

Not all of the comments made on the evaluation forms were beneficial. Some recommendations were out of the range of financial possibilities of the organization at this time. One of these comments was to use promotional items such as T-shirts or other things to attract attention and members. Others recommendations were not within the

rules of the organization. One of these was to include wheelchair tennis as a competitive sport. The organization is part of a national organization and follows the rules set by the parent association. Wheelchair tennis can be included as part of recreational programs, but not for competition. There is a different organization that offers competition in this sport and it would be a repetition of services for this organization to offer it as well.

Items 3 and 5 on the Professional Evaluations had higher standard deviations than all other items. The same reviewer gave the lowest score (2) on both of these items and made the same comment for each. The comment concerned the perceived individual benefit each athlete receives as a result of participation in competition. If the participants do not see benefits, they may not desire to continue as a member. This is a valid comment and came from an evaluator with experience as a wheelchair athlete. This shows the importance of quality programming in retaining athletes as long-term members.

Recommendations

The comments listed above are valuable and can be seen as recommendations for the plan. The one that can be most easily affected is the recommendation to follow-up with agencies as well as new members. This should be included in the text of the plan. If it is not written down, it may get overlooked or forgotten.

One recommendation was not repeated by more than one evaluator but is worthy of mention here. One evaluator gave a name of a person who would be able to contact people with amputations. Amputations are not as prevalent as spinal cord injuries and make this a harder population to target. Due to the rarity of this condition, this group is not easy to target in the hospital rehabilitation setting. The contact person is a prosthetist.

Prostheses need to be custom made for individuals who use them. This means that the person who makes prostheses is more likely to know the members of this population. This person will be included on the contact list in the plan before it is implemented.

Conclusion

The plan was considered successful as it was written. The knowledge of the evaluators will be used to improve the plan. Specific recommendations will be carried out immediately and others may be used in the future as the organization gains the financial means to do so effectively.

Two recommendations will be followed prior to implementation of the plan. Follow-up meetings with the target agencies and new members will be added as a written step in the plan. The name of a contact person for people with amputations will be added to the contact list. The use of promotional materials such as T-shirts and buttons will be considered in the future.

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Appendix A

Marketing Plan Evaluation for Professional Evaluators

Marketing Plan

Professional Evaluation

After reviewing the attached marketing plan, please complete the following questionnaire to the best of your ability. The five point scale ranges from one (disagree) to five (agree). Circle the number that you believe best answers the statement. Please take the time to provide comments in the space provided. Thank you for your time in this matter.

1. Strongly disagree
2. Disagree somewhat
3. Undecided
4. Agree somewhat
5. Strongly agree

NA Not applicable. Not enough information or knowledge of the subject.

1. This plan will attract new members.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

2. This plan can be used on a larger scale to attract members in the rest of the Far West

Wheelchair Athletic Association region of California, Arizona and Nevada.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

3. This plan will attract members beyond an initial three month test period.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

4. This plan is feasible within the budgetary constraints of the organization.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

5. This plan will attract long-term members.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

6. This plan will increase the visibility of the organization.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

7. This plan will establish working relationships with key facilities/personnel in the area of wheelchair sports.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

8. This plan demonstrated a strong background knowledge of the target market.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

9. This plan demonstrated a working knowledge of key concepts in sport marketing.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

Recommended additions/modifications to this plan

Appendix B

Marketing Plan Evaluation for Target Market

Marketing Plan

Target Market Evaluation

After reviewing the attached marketing plan, please complete the following questionnaire to the best of your ability. The five point scale ranges from one (disagree) to five (agree). Circle the number that you believe best answers the statement. Please take the time to provide comments in the space provided. Thank you for your time in this matter.

1. Strongly disagree
2. Disagree somewhat
3. Undecided
4. Agree somewhat
5. Strongly agree

NA Not applicable. Not enough information or knowledge of subject.

1. This plan will attract new members.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

2. This plan can be used on a larger scale to attract members in the rest of the Far West Wheelchair Athletic Association region of California, Arizona and Nevada.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

3. This plan will attract members beyond an initial three month test period.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

4. The target market has respect for members of selected promotional facilities.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

5. This plan will attract long-term members.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

6. This plan will increase the visibility of the organization.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

7. Selected facilities will reach a large population of the target market.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

- 8 This plan demonstrated a strong background knowledge of the target market.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

9. Members of the target market will respond positively to suggestions from members of selected facilities.

Strongly disagree	Disagree somewhat	Undecided	Agree somewhat	Strongly agree	Not applicable
1	2	3	4	5	NA

Recommended additions/modifications to this plan

Appendix C

Summary of Comments

Summary of Comments

The items in italic print (items 4, 7, and 9), refer to items specific to the professional evaluation form. The items that appear in bold print (items 4, 7, and 9) refer to items specific to the target market evaluation form.

1. This plan will attract new members.

Professional Comments

- The plan is thoughtful, comprehensive and providing there is aggressive follow-up, it should be successful. This position assumes that people in wheelchairs have a desire to participate in athletics, which I assume is the case.
- Not sure who this was intended for-spinal cord patients or agencies.
- Members not defined as individual or organization.
- Especially liked use of member athlete to assist with visit to agencies and follow up with support groups.
- I think that you could also target high schools on down. I notice that many colleges are on the list, however, sport benefits those younger as well, including one's self-esteem.
- You have a strong understanding of gatekeeper marketing. I would like to see the addition of some promotional strategies (ie tradeshow booth), use of promotional products along with flat brochures to insure message remains top of mind.
- Good selection of materials.
- Good plan for use of athletics in person to person contact.
- Our organization has realized that the wheelchair sports segment is highly neglected and in need of funding.
- Well structured, with lots of verbal, written, video and repetitive communication should make a significant impact.

Target Market Comments

- Sport is not for everyone, and only those with the right resources and past sport experience will play a roll.
- Contacts with hospitals and rehabilitation centers will bring more newly injured participants. There may be some hesitation at this stage of post-injury to get involved in sports to a great extent.
- By targeting rehabilitation centers and colleges, you will find the newly injured. In many cases, sport participation will increase one's self-confidence after spinal cord injury.
- If they need to be motivated to come, they need to be motivated to stay.

2. This plan can be used on a larger scale to attract members in the rest of the FWWAA region of California, Arizona, and Nevada.

Professional Comments

- Personal contact is an important component of convincing people to become members. I think the further from the Bay Area there is less direct contact.
- The plan has the best chance of being successful if services are provided in a location that is relatively close to where the athlete lives.
- Plan explains FWWAA well. Tape is excellent.
- Encourage use of member athletes to assist in marketing and recruiting, good.
- If on going programs exist in those areas to keep the athletes involved.
- Absolutely agree. The tools in this package are a turnkey solution and will take the fear out of telemarketing.
- Need to recruit more volunteers and dedicate appropriate budget.
- Can be used in other areas of the country.
- A local wheelchair sports team may be a good western start.
- You need to provide names and places where people can train locally and who in their area is available to help.

Target Market

- As long as the material is passed out and followed-up.
- Sure, as long as the facilities exist in these other states.
- Even more if it included tennis.
- It would all depend on geographic locations, and availability of supportive facilities and agencies.
- If you add in some information concerning quadriplegic games.

3. This plan will attract members beyond an initial three month test period.

Professional Comments

- People staying as members is a function of programming. If in the first three months, they experience significant benefits, then I think they would stay as members.
- Member must see benefits in participation in competitions, program and service, in order to desire to continue as members.
- If they're drawn into an activity, possibly. But since they join in the winter, there aren't activities.
- Would be nice to develop on-going relationship with agencies who provide services to potential member athletes.

- If the programs exist to keep one involved then there will be longevity. However, if one must travel hundreds of miles, the interest will drop.
- I didn't see any strong customer relation or after marketing strategies.
- Educating potential resources is half of the battle, but there would be a need to have following information. Newsletters, schedules of events etc., would serve as on-going reminders.

Target Market

- Yes, if you can sustain their interest, I believe the participant will stay involved in sport.
- I think that after 3 months, some form of follow-up may be necessary to keep interest for an individual. I'm thinking of someone who may be interested at the time of the in-service, but maybe not ready to participate yet, or they may need a little more encouragement.
- It should as long as persistent contact and collaboration are maintained with supportive individuals.
- It's not cheap competing for fun or to make a team.
- Yes, as long as current a reliable information is consistently given to the participating college and rehab centers.
- More people will be aware of FWWAA.

4. This plan is feasible within the budgetary constraints of the organization.

- This is greatly dependent on how spread out and available your athletes are to do presentations. The phone contact may be different than person doing presentation.
- We've found that budget problems are the biggest foe. The more in-kind the better. Some programs are so strapped, that if it isn't free, they don't use it.
- In-kind materials are important.
- On a shoestring this is a great plan that could reap big benefits with little monetary investment.
- The plan is feasible, and I would see it growing as more contact agencies are added.
- Appears to be doable given scale/scope of contact and follow-up.
- Looks fine.
- The budget does not have a line item for salary, but otherwise is reasonable.

4. The target market has respect for members of selected promotional facilities.

- This would depend on individual circumstances and be beyond the control or influence of the FWWAA.
- I feel that there is great potential, it is just going to take a very optimistic view.

5. This plan will attract long term members.

Professional Comments

- The plan is good but there has to be a solid array of programming or events to maintain interest.
- If the programs exist to support it.
- It will expose persons with disabilities and professionals to opportunities, but long term commitment will only occur if they see benefit in programming and services.
- Long term retention depends on organization quality.
- Via variety of activities.
- You need to focus on need for lifetime health and fitness and sport for recreation/fun. Many people won't be interested in national/international competition but would still benefit from local recreational sport for fun, health, and fitness.
- Would assume that members interests in participating in athletic competition would have to be long term members in order to compete.

Target Market

- Yes, but only if there is a long-term effect from the experience.
- Once involved, I think it would definitely become long-term.
- It will, as long as members feel satisfied with and an attraction to the design and intent of the FWWAA.
- Yes, because it seems to target Juniors somewhat.
- For those who love competition, the services FWWAA provides are valuable.

6. This plan will increase the visibility of the organization.

Professional Comments

- Visibility will be increased in terms of target agencies. The plan gives control over to the gatekeepers in many instances, so it is difficult to predict wide-spread changes in visibility.
- I'm not sure that an increase of members will increase the visibility. Perhaps, in localized pockets. Visibility to members comes with programs, not an increase in membership.
- On a limited basis for membership, referral sources.
- No advertising or public relations plan/budget included to do that.
- Programming in the form of events is important. Hosting events that attracts media is an important component of the elevation of the organization.

Target Market

- Both the disabled and able-bodied individual will be exposed to FWWAA brochures in rehab centers of college disabled student programs.
- Yes, it will. Yet there are also many other forms of promotion available but which are less focused.
- It could with more in the tape with quadriplegics. Every thing you have pertains to paraplegics.
- By getting the name Far West out there and the services provided to rehabs, hospitals, and community groups, it will be another resource for persons with disabilities.
- Yes, providing we maintain a consistent high profile and produce quality athletes and sports.

7. This plan will establish working relationship with key facilities personnel in the area of wheelchair sports.

- Since the plan is oriented towards a single person making personal contact with people it should work. Also, because of the nature of the cause, facility operators will be supportive.
- That is the strength of the plan.
- Yes, this is the strongest point.
- Yes, although seems focused on SCI.
- Contacts will definitely be made which can increase the effectiveness and outreach of FWWAA.
- Important for continual growth is to maintain contact with organization and professionals who are in contact with potential members.
- It would be great if Far West could facilitate a meeting of these facilities/personnel to share what each program has to offer, avoid too much duplication of sports and discuss which sports need further development.

7. Selected facilities will reach a large population of the target market.

- We need further exposure.
- Particularly SCI centers and schools where active kids can be reached.
- All SCI patients go through weeks of rehab and many others go on to receive higher education.

8. This plan demonstrated a strong background knowledge of the target market.

Professional Comments

- Should also include Individual Learning centers, vocational rehabilitation counselors, advocacy agencies for people with disabilities and how about those 18-19 year olds?
- Indicates experience in working with population.
- Very good research. I would have loved to have seen the Sports Participation Reasons Scale for deeper understanding.
- SCI more than amputees. Again, amputees are harder to find, less obvious disability.
- More so for facilities/personnel than for members.
- The author has read quite a bit on the topic and appears to understand the motivation and the health benefits of potential members.

Target market

- I was happy to read that women in sports is one market that needs some help.
- Yes, but we still need to convince the Able-bodied.

9. *This plan demonstrated a working knowledge of key concepts in sport marketing.*

- At least in this small market, the author shows she understands the importance of how to reach a small market.
- Not familiar with "sports" marketing.
- As far as I know, not familiar with sports marketing specifically.
- Research is very strong. Step by step tools are great. Again, the only thing I'd like to see are the use of some additional tools to reach target groups.
- Overall good package.
- You shouldn't limit your target athletes to only SCI and amputations. There are many people with other disabilities who are eligible and would benefit. With functional classification the field is wide open.

9. Members of the target market will respond positively to suggestions from members of selected facilities.

- Yes, once involved, I feel we have their attention and long term support.
- Particularly having a wheelchair athlete there in person will have a great impact on the prospective members. Truth in testimony sort of thing.
- A good working relationship will provide positive responses from all parties.

Appendix D

Marketing Plan

MARKETING PLAN FOR
FAR WEST WHEELCHAIR ATHLETIC ASSOCIATION

Lauri Yarwasky

May 22, 1997

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Introduction

Instrument

Target Audience

Introduction

The purpose of this marketing plan is to increase the membership of the Far West Wheelchair Athletic Association (FWWAA) through an increased awareness of benefits and services among current and potential members.

Instrument

This marketing plan includes an informational section, a procedural section and the materials necessary to conduct the plan. The informational section includes background information on wheelchair sports and the FWWAA, market research describing reasons people with disabilities participate in wheelchair sports, and budget information.

The procedural section includes step by step instructions of how to carry out the plan. The material section contains lists, samples and promotional materials necessary to carry out the plan. The first list includes the names, addresses and phone numbers of contacts in selected promotional agencies. The second list includes the same information for the volunteer role model athletes from the FWWAA. The sample section includes a copy of a sample introduction letter, an outline of what to say to contacts when calling and a sample thank you letter. Videos and brochures as well as membership forms will be included in the promotional material section.

Target Audience

The target audience of this marketing plan is individuals with spinal cord injuries or amputations who may become members in the Far West Wheelchair Athletic Association as athletes, coaches, or officials. People of any age may become members. Athletes must have a medically diagnosed physical disability that requires the use of a wheelchair to participate in sports. Coaches or officials are not required to use wheelchairs to be

members. Due to budgetary constraints, men and women living in selected Northern California counties will be targeted. Santa Clara, San Mateo, San Francisco, Contra Costa, San Joaquin, and Alameda counties have been selected because of population, proximity to the FWWAA regional office, and current number of participating members from these counties.

Target organizations include universities, junior colleges, community centers, rehabilitation centers, city park and recreation departments, hospitals, spinal cord injury support groups and current and former members. These agencies were chosen based on the frequency with which they work with people with physical disabilities.

Information

Significance

History

Market Research

Budget

Information

The purpose of this marketing plan is to increase membership in the Far West Wheelchair Athletic Association through increased awareness of benefits and services among current and potential members.

Significance

Over 40 million people in the United States have disabilities (Bedini & McCann, 1992). Included in this population are approximately 200,000 to 500,000 people with spinal cord injuries and approximately 875,000 with limb amputations (Sherrill, 1993). The average age of onset of these disabilities is between 16 and 30 years old and 12 to 21 years old, respectively (Sherrill, 1993). The average life span after a spinal cord injury (SCI) is 10.5 years, excluding suicide (Wells & Hooker, 1990).

People with disabilities may experience decreased self-esteem/concept, pressure sores, weight gain, depression, and fatigue as a result of a disability (Lockette & Keyes, 1994; Sherrill, 1993). In addition to these problems, a person with a physical disability can spend 15 times the amount of energy coping with the presence of architectural barriers as a person without a disability (Sherrill, 1993).

The leading causes of death among people with SCI are cardiovascular and respiratory related (Wells & Hooker, 1990). Studies have shown that exercise can have a positive effect on the cardiovascular and respiratory systems of an individual with an amputation or paraplegia (Asayama, et al., 1985; Davis & Shephard, 1988; DiCarlo, Supp, & Taylor, 1983; Gass, Camp, Davis, Eager, & Grout, 1981; Gass & Camp, 1987; Nilsson, Staff, & Pruett, 1975; Pachalski & Mekarski, 1980; Zwiren & Bar-Or, 1975). Research comparing the cardiovascular and respiratory functioning of athletic and non-athletic

people with SCI or amputations has shown similar results (Asayama, et al., 1985; Davis & Shephard, 1988; Okuma, Ogata, & Hatada, 1989). Participation in wheelchair sport has demonstrated the same benefits to a greater degree (Asayama, et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et al., 1982; Okuma, Ogata, & Hatada, 1989; Veeger, Hadj Yahmed, Van der Woude, & Charpentier, 1991; Zwiren & Bar-Or, 1975).

People with SCI and amputations have also demonstrated improvements in mobility and independence, posture, self-esteem/concept, endurance, and activities of daily living as a result of physical activity (Miller, 1995). People with amputations can experience decreased blood pressure and heart rate, increased stroke volume, circulation and muscle endurance, and improved cardiac output as a result of physical activity (Lockette & Keyes, 1994). Participation in wheelchair sport is one way for people with disabilities to receive these benefits (Asayama, et al., 1985; Coutts, 1988; Davis & Shephard, 1988; Emes, 1977; Gass & Camp, 1987; Miles et al., 1982; Okuma, Ogata, & Hatada, 1989; Veeger, Hadj Yahmed, Van der Woude, & Charpentier, 1991; Zwiren & Bar-Or, 1975).

History

Wheelchair Sports and Wheelchair Sports, USA

Wheelchair sport began shortly after World War II when disabled veterans began forming basketball teams at various Veterans Administration hospitals. It was during this time that pioneers in rehabilitation from many parts of the world came to recognize that competitive and recreational sports were an invaluable part

of the rehabilitation process. Soon, the wheelchair sports movement graduated from basketball to many other sports.

Europe's first organized wheelchair sports program was introduced in 1948 by well-known neurosurgeon, Dr. Ludwig Guttman, founder of the Spinal Injury Centre in Stoke-Mandeville, England. The first Stoke-Mandeville Games included only a handful of participants (26), and few events (Shot-put, javelin, club throw, and archery), but growth in both the number of events and participants came quickly. In 1952, a team from the Netherlands was invited to compete with the British team. This was the first International Stoke-Mandeville Games, an event that has been held annually ever since.

Wheelchair Sports, USA (WSUSA), now in its 41st year, was founded in New York in 1956 in conjunction with the first National wheelchair Games at Adelphi College. The initial impetus to organize Wheelchair Sports, USA, grew out of the interests of athletes with disabilities- many of whom were veterans of World War II- to participate in sports other than basketball, which had seen rapid growth in the early 1950's through teams sponsored by veterans hospitals and other rehabilitation agencies. General Omar N. Bradley was one of the leaders of the early efforts to develop wheelchair sports programs, principally for servicemen injured during the war.

In the early days, many wheelchair basketball players saw participation in Wheelchair Sports, USA, sports as supplementary training for their primary interest in basketball. However, the WSUSA program appealed to even greater numbers of athletes with disabilities because it was able to incorporate women and

quadriplegics (those with paralysis in upper as well as lower extremities); two populations which basketball could not reasonably accommodate at that time.

The administrative expenses of WSUSA were underwritten for many years by the Bulova Watch Company, the Bulova family, and the Bulova School of Watchmaking, whose executive director, Benjamin Lipton, served as Wheelchair Sports, USA Chairman for the organization's first 25 years.

The primary focus of WSUSA in the early years was on organizing annual national championship competitions fielding USA teams for international competition. USA teams have competed in world championship competitions annually since 1960 in such countries as England, Israel, the Netherlands, Japan, Argentina, France, and a host of other nations.

Since the early 1970's additional efforts were undertaken to organize Wheelchair Sports, USA programs on more local, regional levels throughout the United States. Today, WSUSA is organized geographically into fourteen regional associations. Each has the responsibility for developing local wheelchair sports programs and for conducting qualifying meets for the National Wheelchair Games.

The national offices of Wheelchair Sports, USA remained in New York for 26 years before moving to Colorado Springs in 1982 to join the many other sports organizations comprising the U. S. Olympic Committee. The move to Colorado Springs and recognition by the U.S. Olympic Committee reflects a principal concern of WSUSA to provide athletic experiences for athletes with disabling paralleling those of the able-bodied, from novice through elite levels.

With the move to Colorado Springs, the first professional staff in Wheelchair Sports, USA's history was hired to administer the many ongoing programs as well as to develop new initiatives to promote wheelchair sports.

The WSUSA has realized major accomplishments in these past years. Wheelchair Sports, USA athletes on several occasions, have traveled to Colorado Springs and the U.S. Olympic Training Center to train alongside their able-bodied counterparts in preparing for International level competition. On August 11, 1984, wheelchair athletes made their formal debut in the Olympic Games with the first-ever exhibition wheelchair track events held in the Los Angeles Memorial Coliseum. In 1988, a wheelchair athlete became the first woman to get a gold medal in the Olympic and Paralympic Games (disabled Olympic Games). The WSUSA played a principal role in conceiving and organizing the events with the Los Angeles Olympic Organizing Committee.

The Wheelchair Sports, USA has also expanded its offerings to disabled youths which make up 30% of the total membership. Regional associations now conduct annual local competitions for youths aged five to 18. In July, 1984, the first Junior National Championships were held, providing the first national program of competitions.

From its earliest beginnings to the present day, WSUSA has been directed and developed by wheelchair athletes and wheelchair sports enthusiasts who themselves are individuals with a first-hand understanding to the values of participation.

By and large, the needs of the wheelchair athlete are not addressed by the vast network of athletic programs available to able-bodied persons through our educational system and community recreation agencies. Instead, the wheelchair athlete has, with rare exceptions, developed his or her own resources and sports opportunities, from rules governing structure (i.e., the WSUSA) to funding travel, equipment and other expenses of competition. Wheelchair sports enthusiasts are involved at all levels of decision-making in the WSUSA and its constituent associations. The WSUSA has remained essentially an all-volunteer organization, drawing on the energy and commitment of the people who also benefit from its programs.

Wheelchair sports have also been described as the most authentic of sports enterprises because the athletes compete and develop their own opportunities for the intrinsic values of participation and not for the promise of professional contracts or financial reward.

The dreams of individual athletes have been made possible through the efforts and dedication of pioneers such as Dr. Guttman and Lipton, and the countless other organizers, volunteers, friends, and supporters of wheelchair sports throughout the United States and the rest of the world. With the continuing increase in public awareness, the future of wheelchair athletic competition is indeed bright. (Jan Elix Wheelchair Sports, USA Promotional materials, 1995 pp.1-3).

Far West Wheelchair Athletic Association

The Far West Wheelchair Athletic Association (FWWAA) is the regional affiliate of WSUSA. Established in 1969, Far West was created to provide sport opportunities for

people with SCI or amputations residing in California, Nevada, or Arizona. Members of Far West are invited to compete in local and regional competitions. Competitors meeting qualifying standards at sanctioned events may compete in national and international meets. The FWWAA also conducts developmental camps and sports clinics to educate people with physical disabilities about different wheelchair sports. Day camps for children, 5 to 18 years old, are held throughout the region every summer to allow children to develop their wheelchair sport skills.

One focus of the Far West Wheelchair Athletic Association is to educate people with SCI and amputations about wheelchair sport. At one time, there were as many as 300 members in the FWWAA. Currently, there are 109 members. Since members compete with and encourage one another, an increase in membership will provide greater opportunities for competition and skill development. An increase in membership will also allow more people with SCI and amputations to receive the benefits of physical activity. A current objective of the FWWAA is to increase awareness of the activities and services provided to current and potential members.

Market Research

Target Audience

The target audience of this marketing plan is individuals with spinal cord injuries or amputations who may become members in the Far West Wheelchair Athletic Association (FWWAA) as athletes, coaches, or officials. This market was chosen to limit the scope of the search and keep the cost of the plan within budgetary constraints. By targeting a specific population, the plan could target agencies working with people with SCI and amputations were chosen making the search more focused.

Getting to know the target audience includes knowing what motivates them to participate in the activities offered by the organization. In 1987 Grimes and French examined perceived barriers to women for participation in sports. Women with disabilities face twice the barriers as men with disabilities. Women are encouraged to participate in sport less than men and women with disabilities are encouraged less than women without disabilities. Six items were identified that make it difficult to motivate women with disabilities to participate in sport. Lack of encouragement as children is the initial difficulty women encounter in entering the field of sport. Training and availability of after school programs for girls or women is a second item. A third reason it is difficult to motivate women to participate in sport is that they are often not interested enough to overcome these barriers to want to participate. This could be due to the lack of knowledgeable trainers and coaches available to girls and women. The fifth reason is the shortage of equipment and the sixth reason is that there are not many role models to encourage women to participate. The passage of Title IX and the ADA has brought attention to the difficulties of women and people with disabilities. These barriers still exist and need to be recognized in order to effectively market to the female half of the population.

In 1991, Brasile, Kleiber and Harnisch conducted a comparison study of reasons athletes with and without disabilities participate in sport. They administered the Participation Reasons Scale to 158 athletes with disabilities and 116 able-bodied athletes in basketball and track and field. The Participation Reasons Scale is a 26 item self-reporting survey using a 5 point Likert-scale to measure reasons people participate in sport. The authors found significant similarities among the groups. Both groups listed the

same two items as most important. These were items associated with opportunities for skill development. The groups also listed the same three items as being least important. These were items related to competition and socialization. The athletes in this study did not feel that competition was the most important reason to participate in sports.

In another study, the Participation Reasons Scale was employed to compare participation motivation between adult and youth athletes with disabilities. In 1991, Brasile and Hedrick surveyed 104 youth and 88 adult male and female wheelchair basketball players. As in the previous study, both groups found items associated with improving their skills to be the most important reasons for participation. While both groups listed pleasing others and getting rewards as least important, they were in different order. The study also revealed differences the value placed by adults and youth on the social aspect of sport. Youth indicated a higher value on socialization than adults.

Competition

There are many organizations that provide sport opportunities for people with disabilities in the Far West Region. Fortunately, these organizations feed into the membership of Far West and do not create competition. The structure of disability sport minimizes competition for members. Each disability is served by a different disability sport organizations creating little competition for members between each organization.

The greatest obstacle to the completion of this marketing plan is funding. For this reason, agencies have been carefully selected to represent areas of greatest potential success. For example, certain city offices do not have programs for people with disabilities. People in these cities are sent to a larger city program to participate. It is these larger city programs that were targeted for this project. The same objective applies

to hospital and rehabilitation centers. Many hospitals do not have a trauma center. There are a few representing many. The few were chosen for this project. All Colleges and Universities have disabled student service programs for people with disabilities. However, not all of them have the same quality Adapted Physical Education programs to teach PE to people with disabilities. For this reason certain colleges and universities were selected.

The structure of competition in Disability Sport is a strength for FWWAA. People who want to compete on national and international levels must be a member of the organization. Another strength of the program is the delivery of desired services to the target population. According to aforementioned research, the target population wants to improve skill level. Far West conducts developmental camps to teach people who use wheelchairs how to play wheelchair sports.

The following budget and marketing plan were developed based on this information.

Budget

Introductory Phone Calls	15 min x 36 x .15	\$ 81.00
Postage	.32 x 36	\$ 11.52
Follow-up Phone Calls	36 x 10 min x .15	\$ 54.00
Travel	1000 mi x .32/mi	\$320.00
Thank you Postage	36 x .32	\$ 11.52
Introductory Packets		
Videos		In - kind
Brochures		In - kind
Letters		In - kind
Sport Information Calendars		In - kind
Total		\$478.04

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Procedures

Procedures

Checklist

Procedures

A marketing packet will be distributed to agencies in target counties. The packet includes a Wheelchair Sports, USA promotional video and brochure, an introduction letter and information about the Far West Wheelchair Athletic Association and Wheelchair Sports, USA. Current Far West Wheelchair Athletic Association athletes will participate as role models for the organization.

This marketing plan consists of three phases. The first phase will establish a working relationship with rehabilitation centers (including schools and city programs) within the counties. This will be done by contacting a list of personnel within targeted agencies in selected counties. An introductory phone call will be made to each contact. After the phone call, the introductory letter will be mailed to the individuals at the participating organizations. A follow up phone call will be made to determine a meeting date to discuss the packets and the organization with each participant. A member athlete will participate in visits to the agencies. Membership forms will be left in their possession to promote the program to clients.

The second phase will establish a relationship with potential members of the Association. This will be done in a manner similar to the one used in phase one. Contact Spinal Cord Injury Support Groups in the target area. Once introductions have been made over the phone, arrange an initial visit with the support group facilitator. Follow-up visits should be made to support groups with permission from the facilitator. Distribute introductory materials to potential members. A volunteer Far West athlete will participate in these visits as a role model for future athletes.

The third step is to introduce those interested in wheelchair sports to the people involved in that particular sport. A person interested in swimming will be invited to meets, or practices of the swimming team. This is a way of informing potential members about what is involved in being a part of the United States Wheelchair Swimming Association. As a part of this phase, individual members of the participating sports will be identified as mentors for their program. One athlete from each sport will introduce potential members to their sport and answer any questions they may have about membership and their sport.

Follow-up

After the completion of each phase, a "Thank You Letter" will be sent to the contacts at each agency, as well as to the visiting athlete. The person visiting each agency will then fill out an Agency Report Form to be filed for future use. Notes on the initial visit should be made. This form will be used for tracking future communications with each agency.

Evaluation

The membership forms distributed to each agency are coded in order to track new members from selected agencies. This will allow determination of how many new members were acquired as a result of the marketing effort.

Steps for completing the plan

1. Review material to familiarize yourself with the procedures, the purpose of the plan and the Far West Wheelchair Athletic Association.
2. Gather checklists of contacts so you can make notes and keep track of the contacts called.
3. Call each person on the contact list to introduce yourself and let them know that you will be sending them a letter.
4. Send out introductory letter.
5. Continue marking checklist for tracking.
6. On the checklist make a date of when to return calls to each person.
7. Return the call on the scheduled date to set a date when you can visit the person and their agency.
8. Prepare packets in advance of the visit.
9. Call the athlete who will be making the visits with you to let them know of the dates and locations of each visit. Send them a confirmation schedule for their records.
10. During the visit, show the video and explain the materials in the introductory packet to the contact. Give the person time to ask questions. Let the athlete do most of the talking. If the athlete feels comfortable, let them go on the visit alone.
11. After the visit, thank the person for their time and give them a business card. Let them know they can call anytime with questions or for more information.
12. Send the person a Thank you letter and continue to monitor the checklist.

13. Keep track of referrals from each agency and contacts made to you by each agency.

This is a way to monitor the effectiveness of the plan as well as the contacts at each agency.

14. Another follow-up idea is to invite contacts from the agencies to certain events. This will show them first hand how the athletes do and how they have benefited from sport after their injury.

CONTACT CHECKLIST

[illegible]

[illegible]

Materials

Introductory phone call

Introduction letter

Follow-up phone call

Thank You Letter

Agency Report Form

Membership Forms

Promotional Packet

Outline of introductory phone call

Good afternoon (morning) (name of person), my name is _____. I am calling from the Far West Wheelchair Athletic Association (FWWAA) to let you know about our organization. Do you work with people with spinal cord injuries and/or amputations? (If yes, continue If no, ask for person who does work with target population)

Are you familiar with our organization? (If no, give brief explanation)

As our name states, we are a Wheelchair Athletic organization. We promote sports for people who use wheelchairs. We also hold developmental camps to teach people to play wheelchair sports.

I would like to introduce you to our organization so that you may pass the information along to those who may benefit from our services. I will send you an introductory letter about the Far West Wheelchair Athletic Association for you to review. *

When you have had time to review the letter, I will call you to set up a time when we can get together and discuss any questions you may have.

During this time, I would like to show a video of what our organization is about as well as introduce you to one of our athletes and give you an introductory packet of materials. I will also leave information for you to distribute to interested parties.

Is this the proper spelling of your name? ("_____")

Is this the correct mailing address? ("_____")

If there is anyone else you would like to share this information with, please let me know so I can send them a letter. Or, you may invite them to join us when we meet.

I will send your letter out today and look forward to meeting you in the future.
Thank you for your time and have a good day.

**If the person says "no" at any point in the conversation:*
Thank you for your time and have a good day.

Sample Introduction Letter

Dear _____,

I enjoyed talking to you on the phone about the Far West Wheelchair Athletic Association's upcoming membership marketing plan. As professionals, we are aware of the therapeutic benefits sport provides for a person with a spinal cord injury or amputation. It is exciting to realize that by working together, we can spread the word, as well as increase the opportunities for people with disabilities to participate in sport and receive these benefits.

The Far West Wheelchair Athletic Association promotes, develops, and organizes wheelchair sports for individuals with physical disabilities. It is the largest sanctioned Regional Sports Organization of Wheelchair Sports USA. Far West was founded on the philosophy that people with disabilities share the same desire and capability for attaining athletic excellence and physical fitness as do their able-bodied peers. We believe these needs are best met through comprehensive sports programs which allow each person to achieve his or her own athletic potential.

We are creating a membership marketing plan in an effort to increase awareness of the programs and information our organization provides. We have chosen rehabilitation centers, City Park and Recreation Departments, and colleges in an effort to reach as many professionals and potential athletes as possible. You can help us by sharing information about the Far West Wheelchair Athletic Association with your clients.

To familiarize you with our organization, we would like to send a representative to meet with you at your facility. This representative will be an athlete member of the Association interested in sharing their experience as a wheelchair athlete and their knowledge of the Far West Wheelchair Athletic Association. The meeting will take approximately 30 minutes including a video of what we are all about. If you do not have a VCR, let us know in advance and we will provide one. In addition to the video, we will bring you promotional materials and membership forms to distribute to your clients.

I will be calling you in the future to set up a time that is convenient for this meeting. I look forward to talking to you again and working with you in the future. If you have any questions, please feel free to call me at (408) 978-2828.

Sincerely,

Lauri Yarwasky
Program Coordinator

Outline of follow-up phone call

This is _____ calling on behalf of the Far West Wheelchair Athletic Association. I am calling to see if you received the introductory letter I sent and to set up a time when we can get together to discuss the organization.

Review calendar and offer choices to agency representative.

Remind person that you would like to show a video and make sure they have a VCR available for use.

Tell them that the meeting will take approximately 30 minutes.

Set date and time and thank person for their time.

Let person know you are looking forward to meeting them.

Thank them again and end conversation.

This call should be brief and last approximately 5 minutes.

If the person is not available and an answering machine or voice mail comes on, leave a message: This is _____ calling on behalf of the Far West Wheelchair Athletic Association. I am calling to see if you received the introductory letter I sent and to set up a time when we can get together to discuss the organization. Please give me a call at (phone number) as soon as possible. Thank you.

If the person does not call back within 3 days, call again and keep trying until you reach the actual person. Do not leave additional messages.

Sample Thank You Letter

Dear,

Thank you for your time and interest in the Far West Wheelchair Athletic Association. I enjoyed meeting you and look forward to working with you in the future.

Together, we can spread the word of sport to people after injury. I believe this is a significant part of the recovery process. Knowing that options exist for life after injury is important.

Thanks again for taking the time to familiarize yourself with our organization. If you have any questions or need additional information in the future, please do not hesitate to call me at the office (408) 978-2828.

Sincerely,

Lauri Yarwasky
Far West Wheelchair Athletic Association

Agency Report Form

Agency:	Contact Person:
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Initial Visit by:	Initial Visit Date:
Comments on Initial Visit:	

Additional Contacts with agency:

[illegible]

Agency Contacts

Hospitals/Rehabilitation Centers

Colleges/Universities

City Park and Recreation Departments

Contacts

The following contacts are people in each agency who are in contact with the target population and who may disseminate information to other professionals in their agency.

Hospital/ Rehabilitation Contacts

Name	Agency	Address	Phone #	Complete
Collette Case	Lucille Salter Packard Children's Hospital Stanford	725 Welch Rd Palo Alto, CA 94304	415/497-8336	
Beverly Emmerson	Mills Peninsula Hospital	1783 El Camino Real Burlingame, CA 94010-3205	415/696-4672	
Dan Forer	Golden State Rehab	490 Golf Club Rd. San Ramon, CA 94583	510/275-6167	
Ron Hamilton	Recreation Center for the Handicapped	207 Skyline Blvd. San Francisco, CA 94132	415/665-4100	
Elaine Hill	VA Palo Alto Health Care	4951 Arroyo Rd Livermore, CA 94550	415/858-3990	
Virginia Kamp	Alta Bates Rehabilitation	2450 Ashby Ave Berkeley, CA 94705	510/643-8031	
Susan Leibrock	Community Hospital of Los Gatos	815 Pollard Rd. Los Gatos, CA 95030	408/378-6131 ext. 4118	
Sandy Segraves	Stanford University Hospital	300 Pasteur Dr. Stanford, CA 94035- 5584	415/723-8322	
Christina Serzant	Laguna Honda Hospital	375 Laguna Honda San Francisco, CA 94116-1499	415/759-3339	
Nancy Spalding	Veterans Affairs Medical Center	4150 Clement St San Francisco, CA 94121-1598	415/221-4810 ext. 3471	
Leon Wong, R.T.	Camping Unlimited, Inc.	P.O. Box 677 Berkeley, Ca 94701	510/527-4488	
Rich Patterson	Valley Medical Center Spinal Cord Injury Support Group	751 South Bascom Ave San Jose, CA 95128	408/973-0802	

School Contacts

Name	Agency	Address	Phone #	Complete
Adapted PE				
Barbara McCarthy	Canada College	4200 Farm Hill Blvd Redwood City, CA 94601	415/306-6457	
Cynthia Berrol, PhD	CSU Hayward	Hayward		
Gary Scott Interim Division Chair	San Joaquin Delta College Adapted PE	5151 Pacific Ave Stockton, CA 95207	209/474-5649	
Joan Worley	West Valley College Adapted PE	14000 Fruitvale Ave Saratoga, CA 95070	408/867-2200	
Joe Bielanski	Vista College Adapted PE	2020 Milvia St. Berkeley, Ca 94704- 1183	510/841-8431	
Mary Bennett	De Anza College Adapted PE	21250 Stevens Creek Bl Cupertino, CA 95014	408/996-4419	
Nancy Megginson	San Jose State University Adapted PE	One Washington Square San Jose, CA 95192	408/924-3014	
Rita O'Loughlin	Foothill College Adapted PE	12345 El Monte Rd Los Altos, CA 94022- 4599	415/949-7777	
Sherrean Carr	Gavilan College Adapted PE	5055 Santa Teresa Bl Gilroy, CA 95020	408/848-4865	
Disabled Student Services				
Sodonia Wilson	Contra Costa College Special Programs	2600 Mission Blvd San Pablo, Ca 94086	510/236-6768	
Dorene Cotter Department Chair, Disabled Student Services	City College of San Francisco	50 Phelan Ave San Francisco, CA 94115	415/239-3000	

Name	Agency	Address	Phone #	Complete
John Hogan	College of San Mateo	1700 West Hills San Mateo, CA 94402	415/574-6469	
Elena Kubby	Foothill College Disabled Student Services	12345 El Monte Rd Los Altos, CA 94022- 4599	415/949-7375	
Terry Armstrong	Diablo Valley College Disabled Student Services	Pleasant Hill, CA 94523	510/685-1230	

City Contacts

Name	Agency	Address	Phone #	Complete
Janice Riccomini	Sunnyvale Parks, Recreation and Neighborhood Services	P. O. Box 3707 Sunnyvale, CA 94088- 3707	408/730-7359	
Peggy McCurdy	Concord Parks and Leisure Services	1352 Appleton Dr. Concord, CA 94733	510/671-3171	
Rene Furtato	Santa Clara Parks and Recreation Department	969 Kiely Blvd. Santa Clara, CA 95051	408/984-3257	
George Musante Athletic Director	City of San Mateo Sports Program	2001 Pacific Blvd. San Mateo, CA 94403	510/377-4712	
Larry Mazola	City of San Francisco Special Needs Division	McLaren Lodge Golden Gate Park 501 Stanyon St. San Francisco, CA 94117-1898	415/666-7039	
Georgina Jones	Alameda Recreation and Park Department	2250 Central Ave. RM 140 Alameda, CA 94501	510/748-4532	
Tim Orr	BORP (Bay Area Outreach and Recreation Program)	830 Bancroft Way Berkeley, CA 94710	510/849-4663	
Elaine Belkind	City of Berkeley Disability Programs	2180 Milvia Ave Berkeley, CA 94710	510/644-6530	
Bob Langone	Stockton Park and Recreation Department Recreation Superintendent	425 N. El Dorado St Stockton, CA 95202	209/937-8285	
Mary Burns	San Francisco Recreation and Park Commission General Manager	McLaren Lodge Golden Gate Park 501 Stanyon St. San Francisco, CA 94117-1898	415/666-7080	

Athletes

Athletes

The following is a comprehensive list of athletes living in target counties who will act as representatives of the organization.

Athletes

Name	Address	Phone #	Sports	Agency Visit /Date
Rick Bennett, Jr.	65 Van Ripper Ln Orinda, CA 94563	510/254-0436	Basketball Ahletics <i>Junior-17</i>	
Jay Brown	1830 Monark Court San Jose, CA 95125	408/269-8419	Archery	
Lynne Carlyton	P.O. Box 503 Cupertino, Ca 95015	408/257-3002	Athletics	
Evelyn Castro	492 Arleta Ave. San Jose, CA 95128	408/280-0269	Archery <i>Junior -17</i>	
Jerry Deets	434 Grant St. Santa Cruz, CA 95060	408/458-3358	Athletics	
Tyler Douglas	5301 Paso Del Rio Way Concord, CA 94521	510/673-9436	Athletics Weightlifting	
Julie Fuller	2832 Woolsey St Berkeley, CA 94705	510/654-0987	Athletics Basketball <i>Junior- 18</i>	
Jesus Guerrero	2151 Main St. #31 Santa Clara, CA 95050	408/296-1405	Archery Athletics Table Tennis <i>Junior - 9</i>	
Jennifer Howitt	30 Daryl Dr Orinda, CA 94563	510/253-0670	Athletics Basketball Table Tennis <i>Junior-15</i>	

Bubba Lopez	490 Madrid St San Francisco, CA 94112	415/253-8275	Athletics Basketball <i>Junior--10</i>	
Melissa Jucia	372 Nature Dr #8 San Jose, CA 95123	408/972-2074	Athletics Archery Swimming <i>Junior- 16</i>	
Jacque Mox	2751 Pepperidge Ct. San Jose, CA 95148	408/274-4888	Athletics Swimming <i>Junior- 14</i>	
Liz Ospina	3160 Homestead Rd #4 Santa Clara, CA 95051	408/261-9372	Swimming	
Scott Parson	5118 Emiline Dr. San Jose, CA 95124	408/377-2860	Athletics	
Terry Peckinpugh	P. O. Box 66326 Scotts Valley, CA 95067	408/475-6056	Athletics	
Nathan Perkins	1245 Hollyburne Ave. Menlo Park, CA 94205	415/322-4323	Athletics	
Mickey Vejnola	630 Somme Ave. Hollister, CA 95023	408/636-5310	Archery Athletics <i>Junior --15</i>	
Chris Winters	625 A Perimeter Rd Mountain View, CA 94043	415/968-5508	Archery Athletics Table Tennis <i>Junior --15</i>	

IMAGE EVALUATION TEST TARGET (QA-3)

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