## Hudson River Local Fish/ Crab Survey

**Date:** __________________________  
**Location (zip Code):** __________________________

**Gender:** _____ F _____ M  
**Age:** _____ Under 55 _____ Over 55

**Ethnicity:** _____ Hispanic/Latino _____ Non-Hispanic/Non-Latino

**Race:** _____ White _____ Black or African American _____ Asian _____ American Indian/Alaskan Native  
_____ Hawaiian Native or Other Pacific Islander _____ Other: (please specify)_____ 

1. **Do you eat fish that you or someone you know caught **LOCALLY?** **  
   **YES**  
   **NO**

   *(If YES please **continue**, if NO please **skip** to number 6)*

2. **Do you know where the local fish was caught?**  
   Hudson River  
   Local Lake  
   Local Stream  
   Not Sure

3. **Do you know what kind of fish it is?**  
   **YES (specify)__________**  
   **NO**

4. **How often do you eat locally caught fish?**  
   Daily  
   Weekly  
   Monthly  
   Yearly

5. **How do you prepare and cook the locally caught fish?** (Circle all that apply in both columns)  
   **Cook whole**  
   **Fry**  
   **Cut off the skin**  
   **Broil**  
   **Cut off the fat**  
   **Bake**  
   **Do not cut off the fat**  
   **Grill/BBQ**  
   **Do not cut off the skin**

6. **Do any of your children (15 and under) eat the fish you or someone you know caught locally?**  
   Don’t have children  
   **YES**  
   **NO**

7. **If yes, how often do they eat locally caught fish?**  
   Daily  
   Weekly  
   Monthly  
   Yearly

8. **Do you eat crab that you or someone you know caught locally?**  
   **YES**  
   **NO**

9. **If yes to question 8, do you eat the crab tomalley (green stuff)?**  
   **YES**  
   **NO**  
   Don’t know

10. **Have you heard about any health advice about eating fish and/or crabs people catch?**  
    **YES**  
    **NO**

11. **What are your best reasons for eating fish or crabs that you catch?** (Circle all that apply)  
   **Save money on food bills**  
   **Cultural/Habit**  
   **I like the way it tastes**  
   **Fish is good for you**  
   **Other: __________________________**

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*CCE provides equal programs and employment opportunities. Please contact the CCE office if you have any special needs.*