

Lowell National Historical Park Visitor Study



**The
Visitor Services
Project**

Superintendent letter to go here

DIRECTIONS

One adult in your group should complete the questionnaire. It should only take a few minutes. When you have completed the questionnaire, please seal it with the sticker provided and drop it in any U.S. mailbox. We appreciate your help.

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:
16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your group on the questionnaire. Data collected through visitor surveys may be disclosed to the Department of Justice when relevant to litigation or anticipated litigation, or to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting a violation of law.
An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Burden estimate statement:

Public reporting burden for this form is estimated to average 12 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Office of Information and Regulatory Affairs of OMB, Attention Desk Officer for the Interior Department, Office of Management and Budget, Washington, D.C. 20503; and to the Information Collection Clearance Officer, Audits and Accountability Team, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

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VISITING LOWELL NATIONAL HISTORICAL PARK

1. Prior to this visit, how did you and your group get information about Lowell National Historical Park? Please check (✓) **all** that apply.

_____ RECEIVED NO INFORMATION PRIOR TO VISIT – **GO ON TO QUESTION 2**

_____ STATE TOURIST INFORMATION CENTER

_____ HIGHWAY INFORMATION (signs and/or 1610 AM radio station)

_____ CONVENTION/VISITOR BUREAU OR CHAMBER OF COMMERCE

_____ FRIENDS OR RELATIVES

_____ OTHER NATIONAL PARK

_____ OTHER TOURIST ATTRACTION

_____ TRAVEL GUIDE/TOUR BOOK

_____ DAUGHTER/SON ATTENDED SCHOOL PROGRAM

_____ WORLD WIDE WEB SITE

_____ CONTACTED THE PARK BY PHONE OR MAIL

_____ NEWSPAPER/MAGAZINE (Please specify: _____)

_____ TV/RADIO

_____ PREVIOUS VISIT(S)

_____ OTHER (Please specify: _____)

2. On this visit, what were your reasons for visiting Lowell National Historical Park? Please check (✓) **all** that apply.

_____ VISIT A NATIONAL PARK SERVICE SITE

_____ LEARN ABOUT INDUSTRIAL HISTORY

_____ LEARN ABOUT HISTORY IN GENERAL

_____ LEARN ABOUT PERSONAL/FAMILY HISTORY

_____ SHOW A FRIEND/RELATIVE LOWELL, MASSACHUSETTS AND LOWELL NATIONAL HISTORICAL PARK

_____ ENJOY RECREATION IN THE PARK (walk, bike, picnic, etc.)

_____ OTHER (Please specify: _____)

3. How did this visit to Lowell National Historical Park fit into your travel plans?
Please check (✓) only **one**.

_____ LOWELL NHP WAS THE PRIMARY DESTINATION

_____ LOWELL NHP WAS ONE OF SEVERAL DESTINATIONS

_____ LOWELL NHP WAS NOT A PLANNED DESTINATION

4. On this trip, what other places did you visit in the Lowell National Historical Park area? Please check (✓) **all** that apply.

_____ NEW ENGLAND QUILT MUSEUM

_____ AMERICAN TEXTILE HISTORY MUSEUM

_____ BRUSH ART GALLERY

_____ WHISTLER HOUSE

_____ OTHER NATIONAL PARK SERVICE SITE

(Please specify: _____)

_____ ALUMNI FIELD (to attend Lowell Spinners baseball game)

_____ BOSTON, MA

_____ OTHER (Please specify: _____)

5. a) On this trip, how much time did you and your group **plan** to spend at Lowell National Historical Park?

_____ NUMBER OF HOURS PLANNED

- b) On this trip, how much time did you and your group **actually** spend at Lowell National Historical Park?

_____ NUMBER OF HOURS SPENT

6. a) Did your group have any trouble locating Lowell National Historical Park?

_____ YES _____ NO – **GO ON TO QUESTION 7**

- b) [If YES, what was the difficulty? Please be specific.

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7. a) Did your group have any trouble finding your way around at Lowell National Historical Park?

_____ YES _____ NO – **GO ON TO QUESTION 8**

- [
b) If YES, what was the difficulty? Please be specific.

8. On the list below, please check (✓) **all** of the activities that you and your group participated in during this trip to Lowell National Historical Park.

_____ VISIT THE VISITOR CENTER

_____ VISIT BOOTT COTTON MILLS MUSEUM

_____ VIEW EXHIBITS

_____ VISIT MUSEUMS

_____ LEARN ABOUT THE INDUSTRIAL REVOLUTION

_____ VISIT TSONGAS INDUSTRIAL HISTORY CENTER

_____ VISIT SUFFOLK MILL TURBINE EXHIBIT

_____ VISIT BOOTT GALLERY (CHILD LABOR EXHIBIT)

_____ ATTEND BOARDING HOUSE PARK
CONCERT/PERFORMANCE

_____ OTHER (Please describe: _____)

YOU AND YOUR OPINIONS

9. On this visit, how many people were in your group, including yourself?

_____ NUMBER OF PEOPLE

10. a) On this visit, were you with a guided tour or educational group?

_____ YES _____ NO – **GO ON TO QUESTION 11**

- [
b) If YES, please indicate the name of the group you were with.

11. On this visit, what kind of group were you with? Please check (✓) only **one**.

- ALONE
 FAMILY WITH CHILDREN
 FAMILY WITHOUT CHILDREN
 FRIENDS
 FAMILY AND FRIENDS
 OTHER (Please describe: _____)

12. For you and each member of your group on this visit, please indicate:

	GENDER M=Male F=Female	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	NUMBER OF VISITS MADE TO THIS PARK (INCLUDING THIS VISIT)	
				PAST 12 MONTHS	PAST 5 YEARS
YOURSELF	_____	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____	_____

13. a) Is English the primary language that you and your group speak?

NO YES – **GO ON TO QUESTION 14**

[

b) If NO, please list your primary language: _____

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14. For you and all the **adults** in your group on this visit, please indicate the highest level of education received. Please circle only **one** for each adult.

	HIGHEST LEVEL OF EDUCATION			
	SOME HS	HS GRAD	BACHELOR DEGREE	GRADUATE SCHOOL
YOURSELF	1	2	3	4
ADULT #2	1	2	3	4
ADULT #3	1	2	3	4
ADULT #4	1	2	3	4
ADULT #5	1	2	3	4
ADULT #6	1	2	3	4
ADULT #7	1	2	3	4

15. On a future visit to Lowell National Historical Park, what types of interpretive programs would you like to have available? Please check (✓) **all** that apply.

INTERPRETERS IN COSTUME FAMILY ACTIVITIES
 TEMPORARY MUSEUM EXHIBITS LECTURES
 CHILDREN'S PROGRAMS MUSIC PROGRAMS
 TEXTILE DEMONSTRATIONS AUDIO TOURS
 CANAL-RELATED PROGRAMS BIKE TOURS
 CRAFT DEMONSTRATIONS MUSEUM TOURS
 OTHER (Please specify: _____)

16. a) As a result of your visit, do you have a better understanding of why Lowell National Historical Park is nationally significant?

YES NO NOT SURE

b) What is the most important information you learned about Lowell National Historical Park?

17. a) Please check (✓) the visitor services and facilities which you or your group **used** at Lowell National Historical Park during this visit.
- b) Next, for only those services which you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services which you or your group used, please rate their **quality** from 1-5.

a) Used service in Lowell NHP? Check (✓)	b) If used, how important?					c) If used, what quality?				
	Not important					Extremely important		Very poor		Very good
	1	2	3	4	5	1	2	3	4	5
_____ VISITOR CENTER SLIDE SHOW										
_____ VISITOR CENTER MUSEUM EXHIBIT										
_____ BOOTT MILLS MUSEUM EXHIBIT										
_____ <i>WORKING PEOPLE</i> EXHIBIT										
_____ MUSEUM STORES										
_____ SELF-GUIDED WALKING TOUR										
_____ RANGER-LED WALKING TOUR										
_____ CANAL TOUR										
_____ TROLLEY										
_____ RESERVATIONS/INFO PHONE LINE										
_____ HIGHWAY SIGNS										
_____ IN-PARK DIRECTIONAL SIGNS										
_____ PARKING										
_____ RESTROOMS										
_____ HANDICAPPED ACCESS										

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18. a) During this visit, did anything detract from your visit to Lowell National Historical Park?

_____ YES _____ NO – **GO ON TO QUESTION 19**

b) If YES, please specify: _____

19. a) On the scale below, please indicate from 1 to 5 how safe you and your group felt on this visit to Lowell National Historical Park. Please circle only **one**.

How safe did you feel?

Extremely safe					Extremely unsafe
1	2	3	4	5	

b) If you felt unsafe, please explain why: _____

20. During this trip, how much money did you and your group spend for lodging, travel, food, and other items in the city of Lowell, Massachusetts? Please write "0" if you and your group did not spend any money in Lowell.

Local residents should only include expenditures that were **directly related** to this visit to the park.

\$_____ LODGING (motel, camping, etc.)

\$_____ TRAVEL (gas, rental car, bus fare, etc.)

\$_____ FOOD (restaurant, groceries, etc.)

\$_____ OTHER (recreation, film, books, gifts, etc.)

21. a) In your opinion, how appropriate is the amount of the \$4 fee for the Boott Cotton Mills Museum? Please circle only **one**.

<u>Too high</u>		<u>About right</u>		<u>Too low</u>
1	2	3	4	5

- b) In your opinion, how appropriate is the amount of the \$4 fee for the canal boat tour? Please circle only **one**.

<u>Too high</u>		<u>About right</u>		<u>Too low</u>
1	2	3	4	5

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22. a) What did you like **most** about your visit to Lowell National Historical Park?

b) What did you like **least** about your visit to Lowell National Historical Park?

23. Overall, how would you rate the quality of the visitor services provided to you and your group at Lowell National Historical Park during this visit? Please circle only **one**.

VERY GOOD GOOD AVERAGE POOR VERY
POOR

24. If you were a manager planning for the future of Lowell National Historical Park, what would you propose? Please be specific.

25. Is there anything else you and your group would like to tell us about your visit to Lowell National Historical Park?

Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox.



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OFFICIAL BUSINESS

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