August, 1998

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Acadia National Park. This will assist us in our efforts to better manage this park and to serve you, the visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take a few minutes during or after your visit.

When your visit is over, please complete the questionnaire. Seal it with the sticker provided on the last page and drop it in any U.S. mailbox.

If you have any questions, please contact Dr. Gary E. Machlis, Visiting Chief Social Scientist, or Margaret Littlejohn, VSP Coordinator, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83844-1133.

Your opinion is appreciated.

Sincerely,

Paul F. Haertel
Superintendent
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, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20013-7127.
YOUR VISIT TO ACADIA NATIONAL PARK

1. **Prior to this trip**, how did you and your group obtain information about Acadia National Park? Please check (✓) all that apply.
   - [ ] RECEIVED NO INFORMATION PRIOR TO VISIT ➔ **GO ON TO QUESTION 2**
   - [ ] LIVE IN THE LOCAL AREA
   - [ ] PREVIOUS VISIT(S)
   - [ ] FRIENDS/ RELATIVES
   - [ ] TRAVEL GUIDE/ TOUR BOOK
   - [ ] TELEVISION/ RADIO PROGRAMS
   - [ ] SCHOOL PROGRAM THAT CHILD ATTENDED
   - [ ] TELEPHONE INQUIRY TO PARK
   - [ ] WRITTEN INQUIRY TO PARK
   - [ ] NEWSPAPER/ MAGAZINE ARTICLES
   - [ ] INTERNET/ ACADIA NP HOME PAGE
   - [ ] INTERNET/ OTHER WEB SITE
   - [ ] CHAMBER OF COMMERCE OR STATE VISITORS BUREAU
   - [ ] OTHER (Please specify: ____________________________)

2. During this trip to Acadia National Park, what sources **outside of Acadia National Park** did you and your group use to obtain park information? Please check (✓) all that apply.
   - [ ] DID NOT OBTAIN PARK INFORMATION DURING VISIT ➔ **GO ON TO QUESTION 3**
   - [ ] LOCAL CABLE TELEVISION
   - [ ] LOCAL TOURIST PUBLICATIONS (*Acadia Weekly, Out and About in Downeast Maine*, etc.)
   - [ ] LOCAL CHAMBER OF COMMERCE
   - [ ] OTHER (Please specify: ____________________________)

3. During this trip, how many days or parts of days did you and your group spend visiting the following places?
   - MOUNT DESERT ISLAND: _____ DAYS (Please list partial days as 1/4, 1/2, etc.)
   - ACADIA NATIONAL PARK: _____ DAYS (Please list partial days as 1/4, 1/2, etc.)
4. a) Please check whether you visited the Acadia National Park Visitor Center or the Thompson Island Information Center during this trip.

   b) Please write what day of your trip you visited the centers (Day 1, Day 2, etc.).

   Visit? (√) __________________________ On which day(s) of your trip?

   ______ ACADIA NATIONAL PARK VISITOR CENTER _________
   ______ THOMPSON ISLAND INFORMATION CENTER _________
   ______ DID NOT VISIT EITHER CENTER

5. On this trip, what forms of transportation did you and your group use to reach Mount Desert Island and Acadia National Park? Please check (√) all that apply.

   ______ CAR/ PICKUP/ VAN WITH TRAILER OR CAMPER
   ______ CAR/ PICKUP/ VAN WITHOUT TRAILER OR CAMPER
   ______ MOTORHOME/ RV WITH TOWED CAR/ BOAT/ TRAILER
   ______ MOTORHOME/ RV WITHOUT TOWED CAR/ BOAT/ TRAILER
   ______ BICYCLE
   ______ TOUR BUS
   ______ SHUTTLE BUS (Downeast Transportation)
   ______ CRUISE SHIP
   ______ FERRY BOAT/ MAIL BOAT
   ______ PRIVATE BOAT
   ______ OTHER (Please specify: ________________________________)

6. a) Did anyone in your group bicycle during this trip to Acadia National Park?

   ______ YES  ______ NO  ➔ GO ON TO QUESTION 7

   b) If YES, were the bicycles brought from home or obtained locally on Mount Desert Island? Please check (√) all that apply.

   ______ BROUGHT BICYCLES FROM HOME
   ______ RENTED BICYCLES ON MOUNT DESERT ISLAND
   ______ OTHER (Please describe: ________________________________)

   PLEASE GO ON TO NEXT PAGE
7. On the list below, please check (✓) all of the activities that you and your group participated in at Acadia National Park during this trip.

- LAKE BOATING/ CANOEING
- WALKING ON CARRIAGE ROADS
- BIKING ON CARRIAGE ROADS
- BIKING ON PARK MOTOR ROADS
- HORSE AND CARRIAGE RIDE
- ATTEND RANGER-LED PROGRAMS
- SIGHTSEEING/ DRIVING FOR PLEASURE
- CAMPING (Seawall or Blackwoods Campgrounds)
- JORDAN POND HOUSE FOOD SERVICE
- OTHER (Please describe: ____________________________)

8. Many businesses offer guided tours, instruction or activities to help visitors enjoy Acadia National Park. On this trip, which of these commercial activities did you and your group pay a fee for while visiting Acadia National Park? Do not include businesses where you only rented equipment. Please check (✓) all that apply.

- BICYCLING TOUR
- HIKING TOUR
- GUIDED ROCK CLIMBING
- SEA KAYAKING TOUR
- BUS TOUR (National Park Tours or Oli’s Trolley)
- BUS TOUR (other origin)
- OTHER (Please describe: ____________________________)

9. a) Is English the primary language that you and your group speak?
   - NO
   - YES ➔ GO ON TO QUESTION 10

   b) If NO, please list the primary language: ____________________________
10. On this visit, how many people were in your **immediate** group, including yourself?

    _____ NUMBER OF PEOPLE

11. On this visit, were you with a guided tour group?

    _____ YES       _____ NO

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

    _____ ALONE       _____ FRIENDS
    _____ FAMILY      _____ FAMILY AND FRIENDS
    _____ OTHER (Please describe:_______________________________________)

13. a) On this visit, did any members of your group have a disability?

    _____ YES       _____ NO   **GO ON TO QUESTION 14**

    b) If YES, please list the disability: ________________________________

    c) Did you and your group encounter any access/service problems in the park?

    _____ YES       _____ NO   **GO ON TO QUESTION 14**

    d) If YES, what were the problems?______________________________

14. For you and your group on this visit, please indicate:

    CURRENT AGE  U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY  NUMBER OF VISITS TO THIS PARK SITE (INCLUDING THIS VISIT)

    YOURSELF      _____                          _____
    MEMBER #2     _____                          _____
    MEMBER #3     _____                          _____
    MEMBER #4     _____                          _____
    MEMBER #5     _____                          _____
    MEMBER #6     _____                          _____
    MEMBER #7     _____                          _____

    **PLEASE GO ON TO NEXT PAGE**
15. a) On this trip, did you and your group bring pets to Acadia National Park?

   YES   NO

b) During this trip to Acadia National Park, did you or your group encounter any dogs off leash?

   YES   NO \(\Rightarrow\) GO ON TO QUESTION 16

c) If YES, did the dogs interfere with your visit?

   YES   NO

d) If YES, how? _______________________________________________________________________

16. a) On the day you received this questionnaire, did you enter the Park Loop Road (see map on next page) in Acadia National Park with a motor vehicle?

   YES   NO \(\Rightarrow\) GO ON TO QUESTION 17

b) Please check (✓) all of the Park Loop Road entrances you used on the day you received this questionnaire.

c) Next, please list the number of times you entered the Park Loop Road at each of the following entrances on the day you received this questionnaire.

   Entrance used (✓) Number of times entered
   _____ CADILLAC MOUNTAIN
   _____ SIEUR DE MONTS
   _____ VISITOR CENTER
   _____ STANLEY BROOK (Seal Harbor Beach)
   _____ OTHER LOCATION (Please specify: ________________________________ )

17. a) During this trip, did traffic congestion and/or parking problems in Acadia National Park or on Mount Desert Island prevent you from doing anything, or affect your visit in other ways?

   YES   NO

b) WITHIN ACADIA NATIONAL PARK

c) If YES, where were the problems? Please be specific. ________________________________

   __________________________________________

d) ON MOUNT DESERT ISLAND (outside park)

   YES   NO

e) If YES, where were the problems? Please be specific. ________________________________

   __________________________________________
18. During this trip, which of these places in Acadia National Park did you and your group visit? Use the map to help you locate the places. Please check (✓) all that apply.

_____ VISITOR CENTER   _____ SCHOODIC PENINSULA
_____ CADILLAC MOUNTAIN SUMMIT   _____ ISLE AU HAUT
_____ EAGLE LAKE PARKING AREA   _____ BAKER ISLAND
_____ LONG POND FIRE ROAD   _____ OTHER PARK ISLANDS
_____ VALLEY COVE AREA   _____ ISLESFORD MUSEUM
_____ BEECH MOUNTAIN FIRE TOWER
_____ PRETTY MARSH PICNIC AREA
_____ SIEUR DE MONTS AREA (Wild Gardens, Nature Center, Abbe Museum)
_____ SAND BEACH, THUNDER HOLE, OTTER POINT AREA
_____ JORDAN POND HOUSE and AREA
_____ SEAWALL AREA (Seawall, Wonderland, Ship Harbor, Bass Harbor Light)
_____ ACADIA MOUNTAIN (Ledges) PARKING AREA

PLEASE GO ON TO NEXT PAGE
19. a) Please check (√) the information services which you or your group **used** during this trip to Acadia National Park.

   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.

<table>
<thead>
<tr>
<th>Use information service?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (√)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ PARK BROCHURE/ MAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ PARK NEWSPAPER: <em>Beaver Log</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ BULLETIN BOARDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ VISITOR CENTER EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ NATURE CENTER EXHIBITS (Sieur de Monts)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ ROADSIDE EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ TRAILSIDE EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ RANGER-LED PROGRAMS/ WALKS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ VISITOR CENTER STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ NATURE CENTER STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ THOMPSON ISLAND INFORMATION CENTER STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ CAMPGROUND STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ ENTRANCE STATION STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ SELF-GUIDING TRAILS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>_____ PARK TRAVELERS INFORMATION RADIO STATION (1610 AM)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
20. a) Please check (√) the visitor services and facilities which you or your group used during this trip to Acadia National Park.

b) Next, for only those services and facilities which you or your group used, please rate their importance from 1-5.

c) Finally, for only those services and facilities which you or your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>Use service/facility?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (√)</td>
<td>Not important</td>
<td>Extremely important</td>
</tr>
<tr>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

_____ PARK ROAD DIRECTIONAL SIGNS
_____ PARK LOOP ROAD
_____ CARRIAGE ROADS
_____ PARKING LOTS
_____ SHUTTLE BUS (*Downeast Transportation*)
_____ RESTROOMS
_____ HIKING TRAILS
_____ BEACHES
_____ CAMPGROUNDS (Blackwoods/ Seawall)
_____ PICNIC AREAS
_____ JORDAN POND HOUSE RESTAURANT
_____ JORDAN POND HOUSE GIFT SHOP
_____ CADILLAC MOUNTAIN GIFT SHOP
_____ THUNDER HOLE GIFT SHOP
_____ WILDWOOD STABLES CARRIAGE RIDES

21. Overall, how would you rate the quality of the visitor services provided to you and your group at Acadia National Park during this trip? Please circle only one.

VERY GOOD    GOOD    AVERAGE    POOR    VERY POOR

PLEASE GO ON TO NEXT PAGE
22. a) During this trip to Acadia National Park, did you and your group stay overnight on Mount Desert Island?

_____ YES  _____ NO ➔ GO ON TO PART d

b) If YES, what type of overnight accommodations did you and your group use during this visit? Please check (√) all that apply.

_____ YEAR-ROUND RESIDENCE  _____ MOTEL OR HOTEL
_____ SUMMER RESIDENCE  _____ BED AND BREAKFAST
_____ CAMPGROUND IN ACADIA NP  _____ PRIVATE CAMPGROUND
_____ SHORT-TERM HOUSE RENTAL (less than one month stay)
_____ OTHER (Please describe: __________________________)

c) On the map below, please circle numbers of the zones where you and your group stayed overnight on Mount Desert Island during this trip.

d) If you and your group did not stay overnight on Mount Desert Island during this trip, in what towns did you stay? Please check (√) all that apply.

_____ TRENTON  _____ ELLSWORTH
_____ BANGOR  _____ OTHER (Please list: __________________________)
23. For each of the following features or qualities of Acadia National Park, please rate its importance (from 1 to 5 or “DK” for don’t know) to you and your group during this visit. Please circle **one** answer for each feature or quality.

<table>
<thead>
<tr>
<th>Feature</th>
<th>Not important</th>
<th>Somewhat important</th>
<th>Extremely important</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCENIC VIEWS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>NATIVE PLANTS AND ANIMALS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>RECREATIONAL OPPORTUNITIES (hiking, camping, fishing, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EDUCATIONAL OPPORTUNITIES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>SOLITUDE/ QUIET</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>WILDERNESS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>CULTURAL/ HISTORIC SITES AND RESOURCES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>CLEAN AIR</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>CLEAN WATER</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

24. a) During this visit, did other visitors and their activities interfere with your visit and enjoyment of Acadia National Park?

   _____ YES       _____ NO ➔ **GO ON TO QUESTION 25**

   b) If YES, how?

25. The number of vehicles in Acadia National Park may need to be limited at some times of the year.

   a) Would you and your group be willing to park your vehicle and ride a **free** island transport bus to visit major park attractions on a future trip? Please check (✓) **only one**.

   _____ YES, LIKELY     _____ NO, UNLIKELY     _____ NOT SURE

   b) Would you and your group be willing to park your vehicle and **pay a fee** to ride an island transport bus to visit major park attractions on a future trip? Please check (✓) **only one**.

   _____ YES, LIKELY     _____ NO, UNLIKELY     _____ NOT SURE

*PLEASE GO ON TO NEXT PAGE*
26. On this visit, what kind of entrance fee did you and your group pay to enter Acadia National Park? Please check (✓) only one.

_____ DID NOT PAY A FEE OR USE A PASS TO ENTER THE PARK

_____ 7 DAY ENTRANCE FEE ($10/vehicle or $3/individual)

_____ PASS (Golden Eagle Pass, Annual Acadia Park Pass, Golden Age Pass, Golden Access Pass)

_____ FEE INCLUDED IN TOUR PACKAGE

_____ DON'T KNOW

_____ OTHER (Please specify:__________________________________________)

27. a) Entrance fees at Acadia National Park are used to help fund park operations. Do you think an entrance fee should be charged?

_____ YES

_____ NO

_____ NOT SURE

b) In your opinion, what is the fairest way to charge entrance fees? Please check (✓) only one.

Check (✓)

_____ PER PERSON

_____ PER VEHICLE

_____ OTHER (Please specify:__________________________________________)

28. What do you think is the National Park Service’s mission at Acadia National Park?

____________________________________________________________________

____________________________________________________________________

29. a) On this visit, what did you and your group like most about your visit to Acadia National Park?

____________________________________________________________________

____________________________________________________________________
b) On this visit, what did you and your group like least about your visit to Acadia National Park?

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

31. Is there anything else you and your group would like to tell us about your visit to Acadia National Park?

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

Visitor Services Project
Cooperative Park Studies Unit
Department of Forest Resources
College of Forestry, Wildlife and
Range Sciences
University of Idaho
Moscow, Idaho 83844-1133