

# Statue of Liberty Visitor Study



The  
Visitor Services  
Project

June 1989

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Statue of Liberty National Monument enjoy, the places they visit within the park, and to more accurately count visitors.

This questionnaire is only being given to a select number of visitors.  
Your participation is very important! It should only take a few minutes of your time during your visit to Statue of Liberty National Monument.

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

If you have any questions, please contact Dr. Gary E. Machlis, Sociology Project Leader, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83843.

We appreciate your help.

Sincerely,

Kevin Buckley  
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.

When did you and your group first arrive at Statue of Liberty National Monument this visit?

Please circle the appropriate day of the week:

S    M    T    W    Th    F    Sa

Write in the hour:

TIME OF DAY \_\_\_\_ a.m. OR \_\_\_\_ p.m.

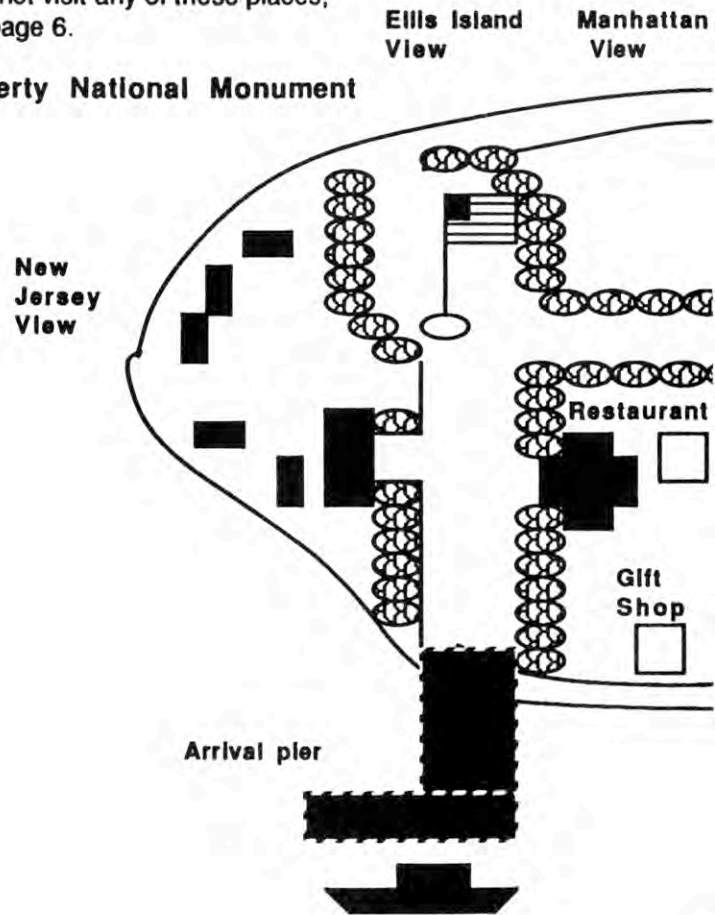
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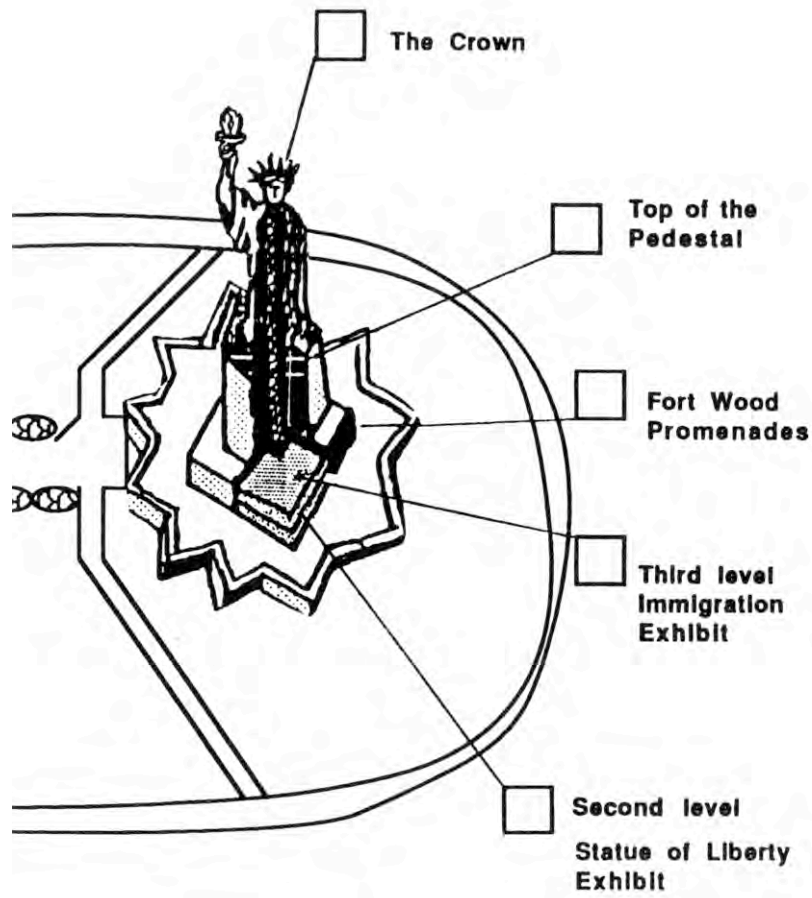


### PLACES YOU VISITED

On the map below, please indicate the places you and your group visited on Liberty Island. Simply check (✓) the box beside each place you visited. If you did not visit any of these places, please go on to page 6.

#### Statue of Liberty National Monument





PLEASE GO ON TO NEXT PAGE



**YOUR ACTIVITIES**

1. On the list below, please check the activities that you and your group did at Statue of Liberty National Monument. Please check ( ) all that apply.

\_\_\_\_\_ PICNIC

\_\_\_\_\_ CLIMB THE STATUE

\_\_\_\_\_ VISIT THE OBSERVATION DECK

\_\_\_\_\_ VISIT THE STATUE EXHIBIT

\_\_\_\_\_ VISIT THE IMMIGRATION EXHIBIT

\_\_\_\_\_ TAKE A RANGER-LED WALK

\_\_\_\_\_ VISIT THE GIFT SHOP

\_\_\_\_\_ VISIT THE RESTAURANT

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

**YOU AND YOUR OPINIONS**

2. How much time did you and your group spend at Statue of Liberty National Monument this visit?

\_\_\_\_\_ NUMBER OF HOURS

3. How many people were in your group?

\_\_\_\_\_ NUMBER OF PEOPLE

4. What kind of group were you with?

- ALONE  
 FAMILY  
 FRIENDS  
 FAMILY AND FRIENDS  
 GUIDED TOUR GROUP  
 YOUTH GROUP  
 OTHER (Please describe: \_\_\_\_\_)

5. For you and your group, please indicate:

- 1) your age on your last birthday,
- 2) the zip code of your permanent residence (if you are from a country other than the United States, please give the name of that country), and
- 3) the number of times you have visited Statue of Liberty National Monument including this visit.

	<b>AGE</b>	<b>ZIP CODE (country)</b>	<b># TIMES VISITED</b>
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
MEMBER #5	_____	_____	_____
additional members	_____		
	_____		
	_____		

**PLEASE GO ON TO NEXT PAGE**



6. a) During this visit did you and your group use any of the following services at Statue of Liberty National Monument? Please check ( ) all that apply.
- b) Next, rate the quality of each service you and your group used during this visit to Statue of Liberty National Monument. Please mark each service used from 1 to 5 (1= VERY GOOD, 2= GOOD, 3= AVERAGE, 4= POOR, 5= VERY POOR).

Use service? ( )	What quality? (1-5)
_____ BOAT TRIP	_____
_____ DIRECTIONAL SIGNS	_____
_____ RESTAURANT	_____
_____ GIFT SHOP	_____

7. What was your primary reason for visiting Liberty Island?  
Please check ( ) one.

\_\_\_\_\_ TO CLIMB THE STATUE AND VISIT THE CROWN

\_\_\_\_\_ TO PICNIC AND VIEW THE HARBOR

\_\_\_\_\_ TO PARTICIPATE IN A RANGER-LED WALK/TALK

\_\_\_\_\_ TO VISIT THE MUSEUM

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

\_\_\_\_\_)



8. a) During this visit did you and your group use any of the following information or interpretive services at Statue of Liberty National Monument? Please check ( / ) all that apply.
- b) How useful were the services you used? Please mark each service used from 1 to 5 (1= EXTREMELY USEFUL, 2= VERY USEFUL, 3= MODERATELY USEFUL, 4= SOMEWHAT USEFUL, 5= NOT USEFUL).

Use service? ( / )		How useful? (1-5)
_____	PARK FOLDER/ MAP	_____
_____	SALES PUBLICATIONS	_____
_____	MUSEUM EXHIBITS	_____
_____	WAYSIDE EXHIBITS	_____
_____	RANGER-LED WALKS/ TALKS	_____
_____	DIRECTIONAL SIGNS	_____

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9. What did you and your group like most about this visit to Statue of Liberty National Monument ?

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10. What did you and your group like least about this visit to Statue of Liberty National Monument?

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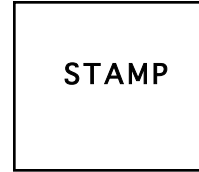
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**OFFICIAL BUSINESS**

**Visitor Services Project  
Cooperative Park Studies Unit  
Department of Forest Resources  
College of Forestry, Wildlife and  
Range Sciences  
University of Idaho  
Moscow, Idaho 83843**