

Lincoln Home Visitor Study



**The
Visitor Services
Project**



United States Department of the Interior

NATIONAL PARK SERVICE
Craters of the Moon National Monument
P.O. Box 29
Arco, Idaho 83213

IN REPLY REFER TO:

July 1989

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Lincoln Home National Historic Site enjoy, the places they visit within the monument, and to more accurately count visitors.

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 of your time during your visit to Lincoln Home NHS.

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,

Gentry Davis
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 Lincoln Home National Historic Site this visit?

Circle the appropriate day of the week:

S M T W Th F Sa

PLEASE GO ON TO NEXT PAGE



GETTING TO LINCOLN HOME

1. On the map below, please draw an arrow showing the route you and your group took to enter Lincoln Home National Historic Site.

YOUR ACTIVITIES

2. On the list below, please check the activities that you and your group did at Lincoln Home National Historic Site. Please check (√) all that apply.

_____ VISIT VISITOR CENTER

_____ TOUR THE LINCOLN HOME

_____ SHOP AT BOOKSTORE

_____ USE THE AREA INFORMATION DESK

_____ REST/RELAX

_____ ATTEND SPECIAL PROGRAMS (lectures, plays, festival)

_____ SELF-GUIDED WALK

_____ OTHER (Please describe: _____)

3. Prior to this visit, how did you and your group learn about Lincoln Home National Historic Site? Please check (√) all that apply.

_____ TRAVEL GUIDE/TOUR BOOK

_____ NEWSPAPER ARTICLES

_____ MAPS OR BROCHURES

_____ INFORMATION FROM SPRINGFIELD CONVENTION & VISITORS BUREAU

_____ ADVICE FROM FRIEND OR RELATIVE

_____ PREVIOUS VISIT(S)

_____ DID NOT GET INFORMATION PRIOR TO VISIT

_____ OTHER (Please describe: _____)

_____)
PLEASE GO ON TO NEXT PAGE



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4. Did you get a ticket to tour the Lincoln Home?

____ YES ____ NO → GO ON TO QUESTION 5



Did you take a tour?

____ YES ____ NO → Why not? _____





Did you have to wait to take a tour?

____ YES ____ NO → GO ON TO QUESTION 5



What did you do while you waited?

5. To tour the Lincoln Home, individuals must obtain tickets on a first come, first served basis. Groups can obtain advance reservations. Which of the following alternatives would you prefer?

____ FIRST COME, FIRST SERVED

____ ADVANCE RESERVATIONS

____ COMBINATION OF THE ABOVE

____ OTHER (Please describe: _____

_____)

6. a) During this visit did you and your group use any of the following information or interpretive services at Lincoln Home National Historic Site? 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)
_____ VISITOR CENTER EXHIBITS	_____
_____ VISITOR CENTER FILMS	_____
_____ TICKET RESERVATION SYSTEM	_____
_____ TOUR OF THE LINCOLN HOME	_____
_____ RANGER-LED WALKS/ PROGRAMS (other than Lincoln Home tour)	_____
_____ PARK BROCHURE	_____
_____ OUTDOOR INTERPRETIVE SIGNS (historic houses)	_____

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7. On the day of your visit to Lincoln Home National Historic Site, did you and your group also visit any of the following sites? Please check (✓) all that apply.

_____ OLD STATE CAPITOL

_____ LINCOLN-HERNDON LAW OFFICES

_____ LINCOLN'S TOMB STATE HISTORIC SITE

_____ GREAT WESTERN DEPOT

_____ LINCOLN'S NEW SALEM STATE HISTORIC SITE

_____ ILLINOIS STATE MUSEUM

_____ CAPITOL COMPLEX VISITOR CENTER

8. Do any members of your group reside outside the Springfield area?

_____ YES



_____ NO



a) If they stayed in the Springfield area on the night before their visit to Lincoln Home, how much did they spend for lodging?



\$ _____



b) On the day of your visit to Lincoln Home, how much did you and your group spend for travel, food and other items in the Springfield area and in Lincoln Home National Historic Site? Please write "0" if you did not spend any money.

	<u>SPRINGFIELD</u> <u>AREA</u>	<u>INSIDE LINCOLN</u> <u>HOME NHS</u>
TRAVEL (gas, bus fare, etc.)	\$ _____	N/A
FOOD (restaurant, self-prepared)	\$ _____	N/A
OTHER (film, gifts, etc.)	\$ _____	\$ _____

YOU AND YOUR OPINIONS

9. How many hours did you and your group spend in Lincoln Home National Historic Site this visit?

_____ NUMBER OF HOURS

10. How many days did you spend in the Springfield area?

_____ NUMBER OF DAYS

11. How many people were in your group?

_____ NUMBER OF PEOPLE

12. What kind of group were you with?

_____ ALONE

_____ FAMILY

_____ FRIENDS

_____ FAMILY AND FRIENDS

_____ GUIDED TOUR GROUP

_____ OTHER (Please describe:_____)

13. How many members of your group were in a wheelchair? If none, please write "0."

_____ IN WHEELCHAIRS

PLEASE GO ON TO NEXT PAGE



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14. 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 Lincoln Home National Historic Site including this visit.

	AGE	ZIP CODE (country)	# TIMES VISITED
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
MEMBER #5	_____	_____	_____

additional members: _____

15. Did you and your group find it difficult to locate Lincoln Home?

_____ YES _____ NO ➔ GO ON TO QUESTION 16



If so, why was it difficult to locate the park? _____

How could locating the park be improved? _____

OFFICIAL BUSINESS

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