National Monuments
Visitor Study

The Visitor Services Project
June 1990

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to the National Mall enjoy, the places they visit within the National Mall, 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 National Mall.

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,

Arnold Goldstein
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 AND PAPERWORK REDUCTION ACTS STATEMENT:
16 U.S.C. 1a-7 authorizes the collection of this information. The primary use of this information is to learn about the expectations, opinions and interests of visitors to this park and will be used by park managers to better manage this park. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. The information may also be provided to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting a violation of law; to the Department of Justice when relevant to litigation or anticipated litigation.

BURDEN ESTIMATES: Public reporting burden for this collection of information is estimated to average 12 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the collection of information. Direct comments regarding the burden estimate or any other aspect of this form to Service Information Collection Clearance Officer, National Park Service, Department of the Interior, Washington D.C. 20240; and the Office of Management and Budget, Paperwork Reduction Project, 1024-0061, Washington D.C. 20503.
PLACES YOU VISITED

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

The National Mall

_____ U.S. Capitol
_____ Lincoln Memorial
_____ Jefferson Memorial
_____ Washington Monument
_____ The White House
_____ Vietnam Veterans Memorial
_____ Smithsonian Visitor Center
_____ National Air & Space Museum
_____ National Museum of American History
_____ Constitution Gardens 56 Signers Memorial
On the map below, please indicate the places you and your group visited near the National Mall this trip. Simply check (✓) the box beside each place you visited. If you did not visit any of these places, please go on to page 6.
YOU AND YOUR OPINIONS

2. How much time did you and your group spend at the National Monuments this visit?

   If less than one day (fewer than 24 hours):

   _____ NUMBER OF HOURS

   If one day or more (24 hours or more):

   _____ NUMBER OF DAYS

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

   _____ BUS TOUR

   _____ OTHER (Please describe: ___________________)
5. For you and your group, please indicate:

<table>
<thead>
<tr>
<th>CURRENT AGE</th>
<th>ZIP CODE OR COUNTRY (INCLUDING THIS VISIT)</th>
<th># TIMES VISITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>YOURSELF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBER #7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Did you use an organized bus tour to get to the site where you received this questionnaire? Please check (√) one.

   _____ YES
   _____ NO
7. a) Several information/interpretive services are available to visitors at the National Monuments. Did you and your group use any of the following? Please check (✓) all that apply.

b) Next, rate the quality of each service you and your group used. Please rate each service or facility used from 1 to 5 (1= VERY GOOD, 2= GOOD, 3= AVERAGE, 4= POOR, 5= VERY POOR).

<table>
<thead>
<tr>
<th>Use information/interpretive service?</th>
<th>What quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(✓) WELCOME TO WASHINGTON MAP/BROCHURE</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) EXHIBITS INSIDE MEMORIALS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) SALES PUBLICATIONS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) OUTSIDE EXHIBITS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) NPS INFORMATION KIOSKS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) RANGER LED TALKS/WALKS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) MEMORIAL BROCHURES</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) RANGER ASSISTANCE</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) OUTDOOR MAPS</td>
<td>(1-5)</td>
</tr>
<tr>
<td>(✓) OTHER (Please describe:</td>
<td>(1-5)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. a) Several support services/facilities are available to visitors at the National Monuments. Did you and your group use any of the following? Please check (√) all that apply.

b) Next, rate the quality of each service you and your group used. Please rate each service or facility used from 1 to 5 (1 = VERY GOOD, 2 = GOOD, 3 = AVERAGE, 4 = POOR, 5 = VERY POOR).

<table>
<thead>
<tr>
<th>Use support service/facility? (√)</th>
<th>What quality (1-5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____ SNACK BARS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ SOUVENIR SALES</td>
<td>_____</td>
</tr>
<tr>
<td>_____ TOURMOBILE</td>
<td>_____</td>
</tr>
<tr>
<td>_____ PADDLE BOATS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ RESTROOMS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ SIT DOWN RESTAURANTS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ MOBILE FOOD CARTS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ HANDICAPPED ACCESS</td>
<td>_____</td>
</tr>
<tr>
<td>_____ METRO (SUBWAY)</td>
<td>_____</td>
</tr>
</tbody>
</table>
9. The open grass area between the U.S. Capitol building and the Washington Monument (bounded by 15th and 13th Streets, Jefferson and Madison Drives) is called the National Mall. If you were planning for the future of the National Mall, what would you propose? Please be specific.

__________________________________________________________________________

__________________________________________________________________________

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__________________________________________________________________________

10. What did you and your group like most about this visit to the National Monuments?

__________________________________________________________________________

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__________________________________________________________________________

__________________________________________________________________________
11. What did you and your group like least about this visit to the National Monuments?

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________________________________________________________________________

12. Is there anything else you would like to tell us about your visit to the National Monuments?

________________________________________________________________________

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

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