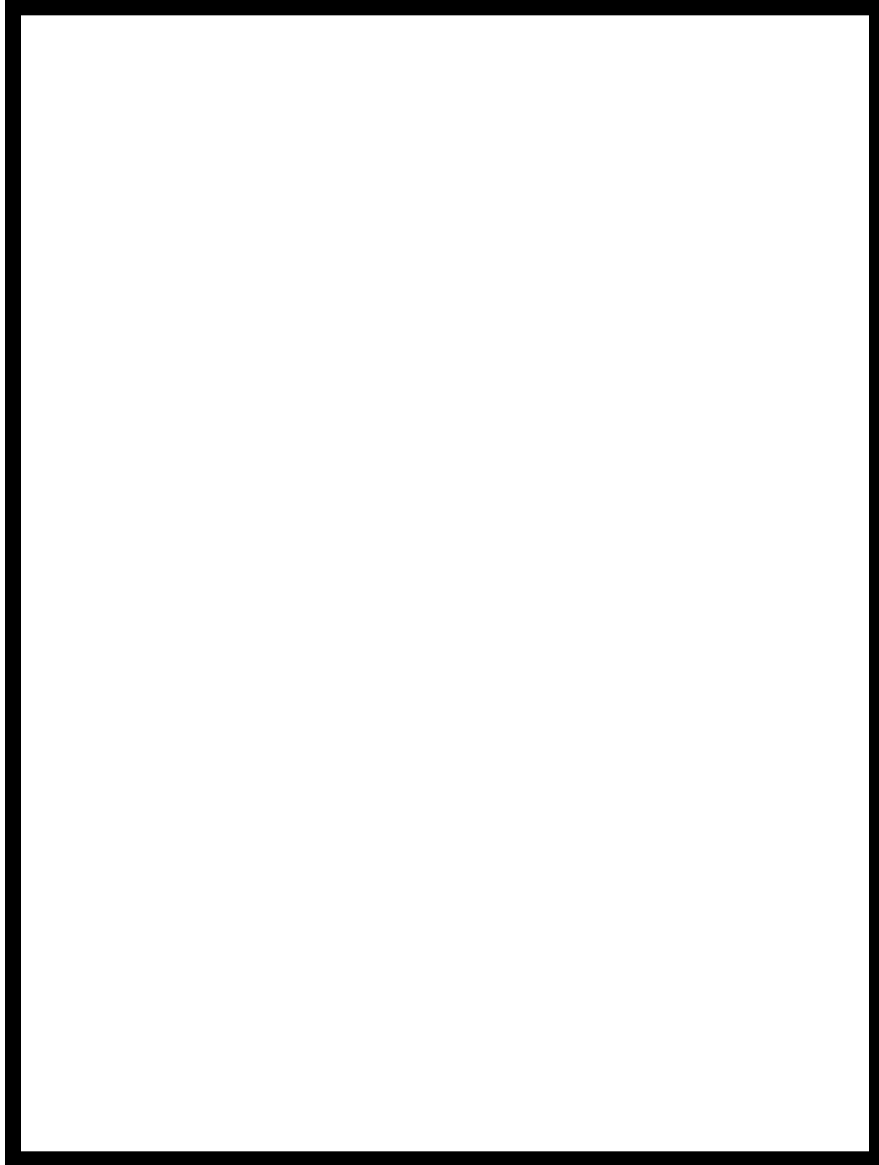


National Monuments

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.

PLEASE GO ON TO NEXT PAGE



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

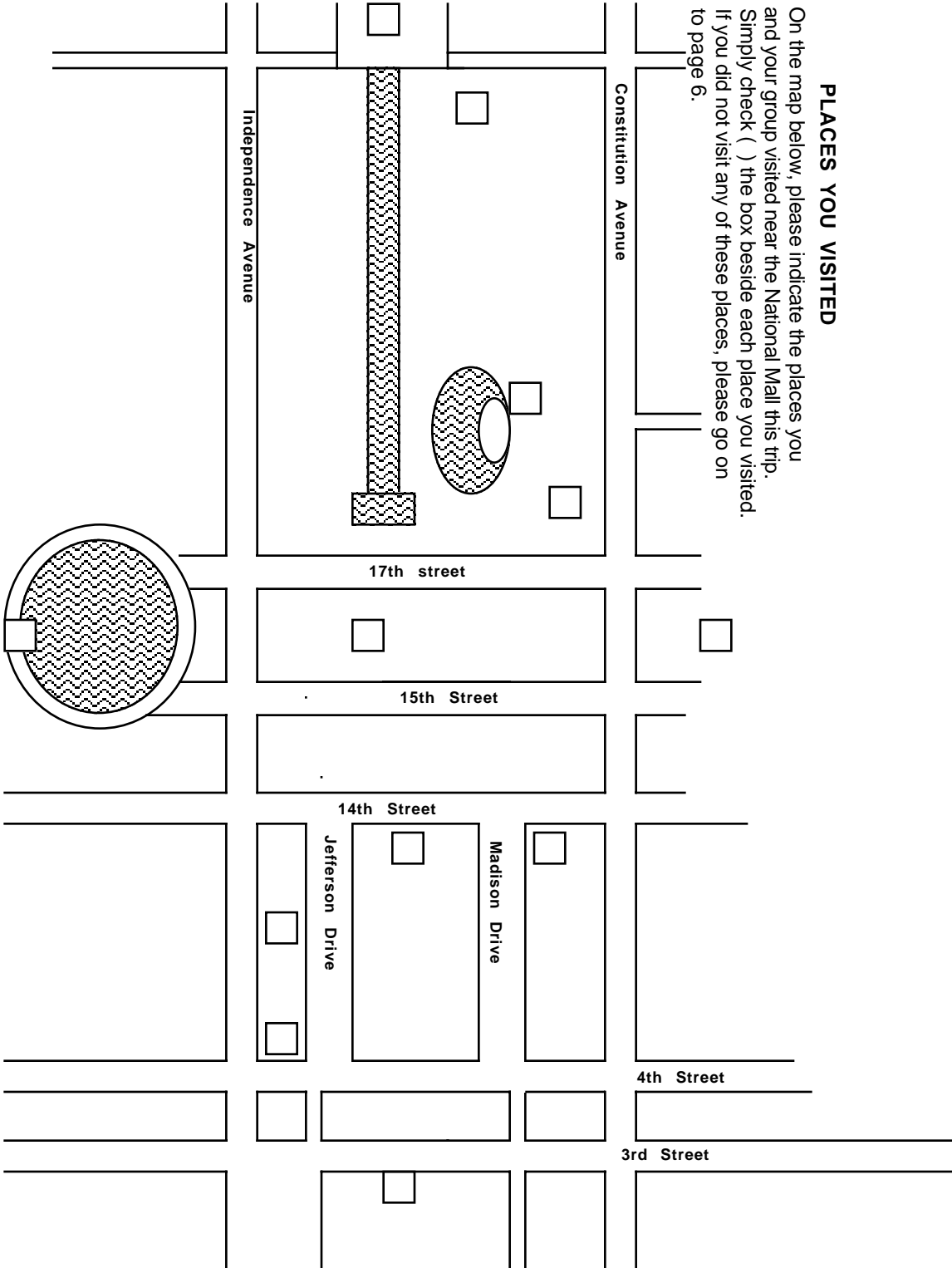
- U.S. Capitol
- Lincoln Memorial
- Jefferson Memorial
- Washington Monument
- The White House
- Vietnam Veterans Memorial
- Smithsonian Visitor Center
- National Air & Space Museum
- National Museum of American History
- Constitution Gardens 56 Signers Memorial

PLEASE GO ON TO NEXT PAGE



PLACES YOU VISITED

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:

	CURRENT AGE	ZIP CODE OR COUNTRY	# TIMES VISITED (INCLUDING THIS VISIT)
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
MEMBER #5	_____	_____	_____
MEMBER #6	_____	_____	_____
MEMBER #7	_____	_____	_____

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

_____ YES

_____ NO

PLEASE GO ON TO NEXT PAGE



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).

Use information/interpretive service? (√)		What quality? (1-5)
_____	WELCOME TO WASHINGTON MAP/BROCHURE	_____
_____	EXHIBITS INSIDE MEMORIALS	_____
_____	SALES PUBLICATIONS	_____
_____	OUTSIDE EXHIBITS	_____
_____	NPS INFORMATION KIOSKS	_____
_____	RANGER LED TALKS/WALKS	_____
_____	MEMORIAL BROCHURES	_____
_____	RANGER ASSISTANCE	_____
_____	OUTDOOR MAPS	_____
_____	OTHER (Please describe:	_____
		_____).

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).

Use support service/facility? (✓)	What quality (1-5)	
_____	SNACK BARS	_____
_____	SOUVENIR SALES	_____
_____	TOURMOBILE	_____
_____	PADDLE BOATS	_____
_____	RESTROOMS	_____
_____	SIT DOWN RESTAURANTS	_____
_____	MOBILE FOOD CARTS	_____
_____	HANDICAPPED ACCESS	_____
_____	METRO (SUBWAY)	_____

PLEASE GO ON TO NEXT PAGE



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.

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

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

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

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

STAMP

OFFICIAL BUSINESS

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