Jefferson National Expansion Memorial Visitor Study

The Visitor Services Project
June, 1991

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Jefferson National Expansion Memorial 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 Jefferson National Expansion Memorial.

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,


Jerry L. Schober
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 the 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.

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 Service Information Collection Clearance Officer, National Park Service, P.O. Box 37127, Washington D.C. 20014-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0097, Washington D.C. 20503.
1. How did you and your group get information about the Jefferson National Expansion Memorial? Please check ( ) all that apply.

_____ STATE TOURIST INFORMATION CENTERS

_____ TRAVEL GUIDE/ TOUR BOOK

_____ NEWSPAPER/ MAGAZINE ARTICLES

_____ MAPS

_____ ADVICE FROM FRIENDS OR RELATIVES

_____ PREVIOUS VISIT(S)

_____ TELEPHONE INQUIRY TO THE PARK

_____ WRITTEN INQUIRY TO THE PARK

_____ NO INFORMATION PRIOR TO VISIT

_____ OTHER (Please describe:____________________)

_________________________________________________
YOUR ACTIVITIES

2. On the list below, please check the activities that you and your group did at Jefferson National Expansion Memorial. Please check ( ) all that apply.

______ VISIT THE MUSEUM OF WESTWARD EXPANSION
______ VIEW FILMS
_______ RIDE TO THE TOP OF THE ARCH
______ VISIT THE MUSEUM BOOKSHOP
______ VISIT THE OLD COURTHOUSE
______ VISIT THE OLD COURTHOUSE EXHIBIT GALLERIES
______ WALKED THE GROUNDS FOR EXERCISE
______ USE THE RESTROOMS
_______ VISIT THE EXHIBIT ON THE 75th ANNIVERSARY OF THE NATIONAL PARK SERVICE
______ VISIT THE INFORMATION DESK
_______ OTHER (Please describe: ____________________________)

PLEASE GO ON TO NEXT PAGE
3. Did you have to wait for the ride to the top of the Arch? 
   Please check ( ) one.
   _____ NO  GO ON TO QUESTION 4
   _____ YES

   If yes, how long was your wait? _____ HOURS

   How did you spend your time? (Please explain.)

   REASONS YOU VISITED

4. What was your primary reason for visiting Jefferson National Expansion Memorial? Please check ( ) only one.
   _____ TO VISIT THE MUSEUM OF WESTWARD EXPANSION
   _____ TO VISIT THE OLD COURTHOUSE
   _____ TO RIDE TO THE TOP OF THE GATEWAY ARCH
   _____ TO SEE THE GATEWAY ARCH
   _____ TO ENJOY RECREATIONAL ACTIVITIES
   _____ TO ATTEND RANGER-LED PROGRAMS
   _____ OTHER (Please describe: )
5. What languages do you, or someone in your group, understand and speak fluently? Please check ( ) all that apply.

_____ FRENCH  _____ ITALIAN  
_____ GERMAN  _____ SPANISH  
_____ ENGLISH  _____ JAPANESE  
_____ CHINESE  _____ RUSSIAN  
_____ SIGN LANGUAGE (American Sign Language or Signed English)  
_____ OTHER (Please specify: ________________________________  
______________________________)

6. How much time did you and your group spend at the Jefferson National Expansion Memorial this visit?

_____ NUMBER OF HOURS AT THE ARCH  
_____ NUMBER OF HOURS AT THE OLD COURTHOUSE

7. How many people were in your group?

_____ NUMBER OF PEOPLE

8. What kind of group were you with? Please check ( ) one.

_____ ALONE  
_____ FAMILY  
_____ FRIENDS  
_____ FAMILY AND FRIENDS  
_____ GUIDED TOUR GROUP  
_____ OTHER (Please describe: ____________________)

PLEASE GO ON TO NEXT PAGE
9. For you and your group, please indicate:

<table>
<thead>
<tr>
<th>CURRENT AGE</th>
<th>U.S. ZIP CODE</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>
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<tr>
<td>MEMBER #3</td>
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<td>MEMBER #4</td>
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<td>MEMBER #5</td>
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<td>MEMBER #6</td>
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<tr>
<td>MEMBER #7</td>
<td>___</td>
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</table>

10. Did you find it difficult to locate Jefferson National Expansion Memorial?
    Please check (   ) one.

   _____ NO   GO ON TO QUESTION 11
   _____ YES

If yes, how could locating Jefferson National Expansion Memorial be made easier? (Please explain.)

   ___________________________________________________
   ___________________________________________________
   ___________________________________________________

11. Jefferson National Expansion Memorial charges fees for several of the services available (entrance fee, tram ride, movie). What was your impression of these fees? Please check (   ) one opinion.

   _____ TOO EXPENSIVE
   _____ APPROPRIATELY PRICED
   _____ UNDER PRICED
   _____ NO OPINION

12. a) During this visit did you and your group use any of the following facilities or services at Jefferson National Expansion Memorial? Please check (   ) all that apply.
b) Next rate (from 1-5) the quality of each facility or service you or your group used during this visit to Jefferson National Expansion Memorial.

<table>
<thead>
<tr>
<th>Use service?</th>
<th>What quality? (1-5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GATEWAY ARCH INFORMATION DESK</td>
<td></td>
</tr>
<tr>
<td>GATEWAY ARCH TICKET CENTER</td>
<td></td>
</tr>
<tr>
<td>GATEWAY ARCH MUSEUM SHOP</td>
<td></td>
</tr>
<tr>
<td>TRAM STAFF</td>
<td></td>
</tr>
<tr>
<td>THEATER STAFF</td>
<td></td>
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<tr>
<td>PARK RANGERS PROGRAMS AT THE MUSEUM</td>
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<tr>
<td>PARK RANGERS AT THE TOP OF THE ARCH</td>
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<tr>
<td>PARK RANGER PROGRAMS AT THE OLD COURTHOUSE</td>
<td></td>
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<tr>
<td>THE ARCH PARKING GARAGE</td>
<td></td>
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<tr>
<td>OTHER (Please describe:</td>
<td></td>
</tr>
</tbody>
</table>

PLEASE GO ON TO NEXT PAGE
13. What did you and your group like **most** about your visit to Jefferson National Expansion Memorial?

14. What did you and your group like **least** about your visit to Jefferson National Expansion Memorial?
15. Is there anything else you would like to tell us about your visit to Jefferson National Expansion Memorial?

________________________________________________________________________
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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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College of Forestry, Wildlife and
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