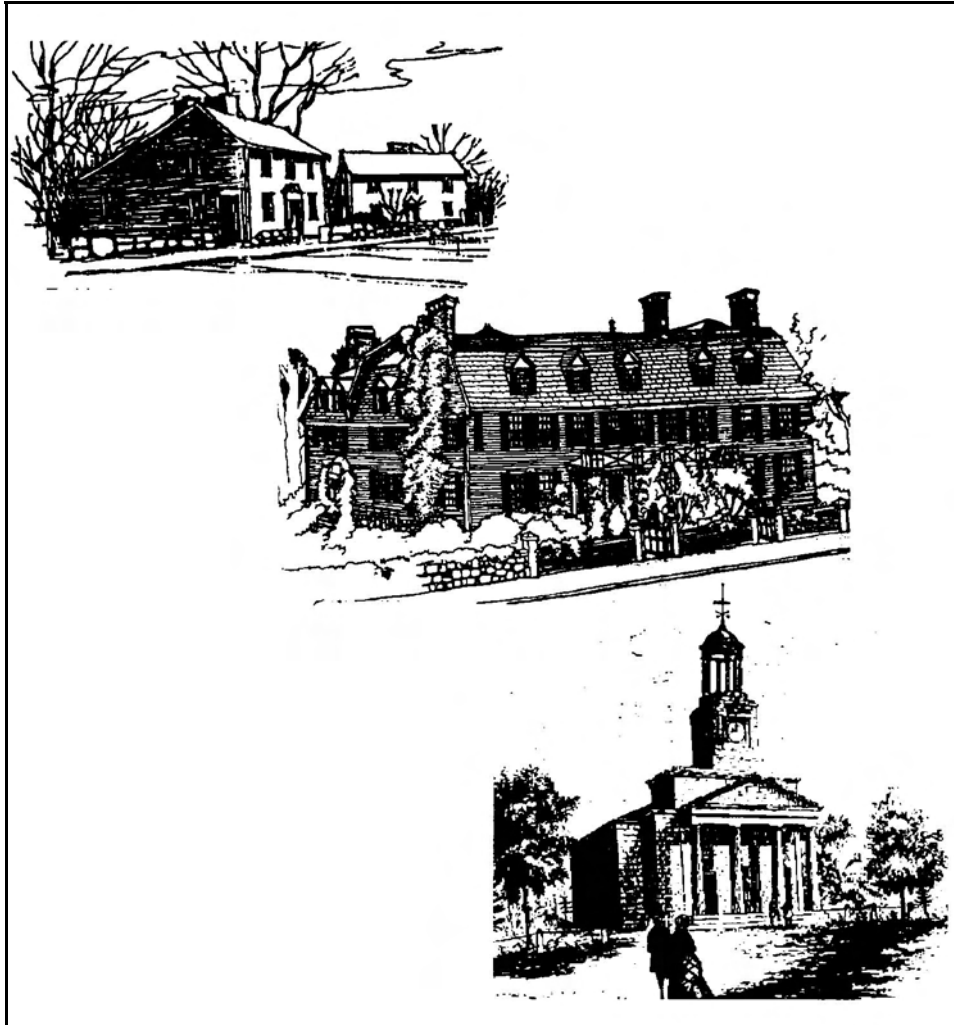
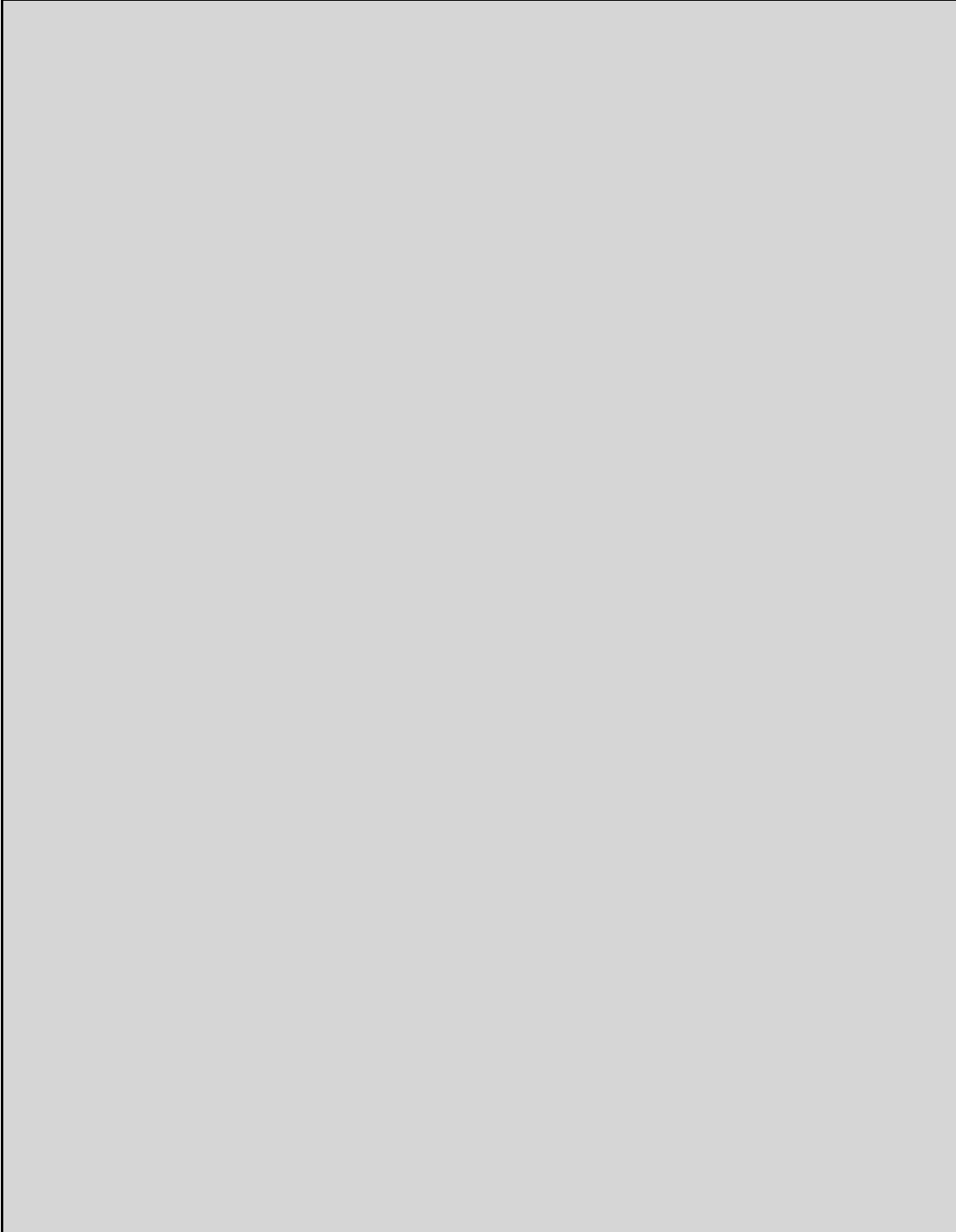


# Adams National Historic Site Visitor Study



**The  
Visitor Services  
Project**



**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 authorize 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 the Service Information Collection Clearance Officer, National Park Service, P.O. Box 37127, Washington, D.C. 20013-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0000, Washington, D.C. 20503.

PLEASE GO ON TO NEXT PAGE



## Your Visit to Adams National Historic Site

1. Prior to this visit, how did you and your group obtain information about Adams National Historic Site? Please check (✓) **all** that apply.

\_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**

\_\_\_\_\_ PREVIOUS VISIT(S)

\_\_\_\_\_ FRIENDS OR RELATIVES

\_\_\_\_\_ TRAVEL GUIDE/TOUR BOOK

\_\_\_\_\_ MAPS/BROCHURES

\_\_\_\_\_ NEWSPAPER/MAGAZINE

\_\_\_\_\_ TV/RADIO

\_\_\_\_\_ OTHER NATIONAL PARK SITE

\_\_\_\_\_ TELEPHONE OR WRITTEN INQUIRY TO THE PARK

\_\_\_\_\_ OTHER SOURCE IN THE BOSTON AREA

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

2. On this visit, what were your reasons for visiting Adams National Historic Site? Please check (✓) **all** that apply.

\_\_\_\_\_ INTEREST IN THE ADAMS FAMILY

\_\_\_\_\_ INTEREST IN HISTORIC HOMES

\_\_\_\_\_ VIEW THE GARDEN AND GROUNDS

\_\_\_\_\_ LEARN ABOUT UNITED STATES HISTORY

\_\_\_\_\_ VISIT A NATIONAL PARK SERVICE SITE

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

3. What forms of transportation did you and your group use to get to Adams National Historic Site? Please check (√) **all** that apply.

PRIVATE VEHICLE                       TAXI CAB  
 SUBWAY (MBTA)                       CITY BUS (MBTA)  
 TOUR BUS                                       WALK  
 BICYCLE  
 OTHER (Please specify: \_\_\_\_\_)

4. a) On the list below, please check (√) the sites you and your group visited at Adams National Historic Site during this visit.

b) Next, please indicate the order in which you and your group visited these sites. Simply write 1, 2, 3, and 4 on the blank beside each place you visited.

Visit? (√)	Order (1,2,3,4)
<input type="checkbox"/> VISITOR CENTER	_____
<input type="checkbox"/> ADAMS BIRTHPLACES	_____
<input type="checkbox"/> ADAMS OLD HOUSE	_____
<input type="checkbox"/> UNITED FIRST PARISH CHURCH	_____

5. How did this visit to Adams National Historic Park fit into your travel plans? Please check (√) only **one** answer.

THIS WAS THE PRIMARY DESTINATION  
 THIS WAS ONE OF SEVERAL DESTINATIONS  
 THIS WAS NOT A PLANNED DESTINATION

PLEASE GO ON TO NEXT PAGE



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## Your Activities

6. On the list below, please check (✓) **all** of the activities that you and your group participated in during this visit to Adams National Historic Site.

\_\_\_\_\_ STOP AT THE VISITOR CENTER

\_\_\_\_\_ RIDE THE TROLLEY TO ADAMS SITES

\_\_\_\_\_ TAKE GUIDED TOUR OF ADAMS OLD HOUSE

\_\_\_\_\_ TAKE GUIDED TOUR OF ADAMS BIRTHPLACES

\_\_\_\_\_ TAKE GUIDED TOUR OF UNITED FIRST PARISH CHURCH

\_\_\_\_\_ WALK OLD HOUSE GARDEN AND GROUNDS

\_\_\_\_\_ VISIT HANCOCK CEMETERY

\_\_\_\_\_ USE QUINCY HISTORIC TRAIL

\_\_\_\_\_ SHOP IN THE VISITOR CENTER BOOKSTORE

\_\_\_\_\_ EAT IN A QUINCY RESTAURANT

\_\_\_\_\_ SHOP IN QUINCY

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

7. a) On this visit, how much time did you and your group plan to spend at Adams National Historic Site? Please write "0" if you did not plan to spend any time at Adams NHS.

\_\_\_\_\_ HOURS AND/OR \_\_\_\_\_ MINUTES

- b) On this visit, how much time did you and your group spend at Adams National Historic Site?

\_\_\_\_\_ HOURS AND/OR \_\_\_\_\_ MINUTES

## About Your Group

8. On this visit, how many people were in your group?

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

9. On this visit, what kind of group were you with? Please check (✓) only **one**.

\_\_\_\_\_ ALONE

\_\_\_\_\_ FAMILY

\_\_\_\_\_ FRIENDS

\_\_\_\_\_ FAMILY AND FRIENDS

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

10. On this visit, were you with a guided tour group (bus tour, etc)?

\_\_\_\_\_ YES          \_\_\_\_\_ NO

11. For you and your group, please indicate:

	<b>CURRENT AGE</b>	<b>U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY</b>	<b>NUMBER OF VISITS TO THIS PARK (INCLUDING THIS VISIT)</b>
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
MEMBER #5	_____	_____	_____
MEMBER #6	_____	_____	_____
MEMBER #7	_____	_____	_____

PLEASE GO ON TO NEXT PAGE



12. On this visit to Adams National Historic Site, what other places did you and your group visit or plan to visit? Please (✓) check **all** that apply.

<input type="checkbox"/> QUINCY HOMESTEAD	<input type="checkbox"/> JOSIAH QUINCY HOUSE
<input type="checkbox"/> ADAMS ACADEMY	<input type="checkbox"/> HANCOCK CEMETERY
<input type="checkbox"/> PENN'S HILL	<input type="checkbox"/> THOMAS CRANE LIBRARY
<input type="checkbox"/> QUINCY QUARRIES	<input type="checkbox"/> GRANITE RAILWAY INCLINE
<input type="checkbox"/> FORE RIVER SHIPYARD	
<input type="checkbox"/> OTHER QUINCY SITES (Please specify: _____ _____ )	
<input type="checkbox"/> OTHER BOSTON SITES (Please specify: _____ _____ )	

13. For the entire day of your visit to Adams National Historic Site, approximately how much money did you and your group spend for travel, food, and other items within the Quincy area? Please write "0" if you and your group did not spend any money.

	<b>In Quincy</b>
TRAVEL (gas, etc.)	\$ _____
FOOD (restaurant, groceries, etc.)	\$ _____
OTHER (souvenirs, film, gifts, etc.)	\$ _____



## Your Opinions

14. a) Please check (✓) the visitor services and facilities which you and your group **used** during this visit to Adams National Historic Site.

b) Next, for only those services and facilities which you and your group used, please rate their **importance** from 1-5.

c) Finally, for only those services and facilities which you or your group used, please rate their **quality** from 1-5.

Use service or facility? quality?	If used, how important?					If used, what				
	Very important		Not important			Very good		Very poor		
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ VISITOR CENTER										
_____ BOOK SALES AREA										
_____ PARK BROCHURE/MAP										
_____ PARK PERSONNEL										
_____ TOUR OF ADAMS OLD HOUSE										
_____ TOUR OF ADAMS BIRTHPLACES										
_____ TOUR OF CHURCH (United First Parish)										
_____ OLD HOUSE GARDEN & GROUNDS										
_____ TOUR TICKETING										
_____ TROLLEY TO SITES										
_____ HANDICAPPED ACCESS										

PLEASE GO ON TO NEXT PAGE



## Your Ideas For the Future

15. a) Did you wait to take a tour of the Adams Old House?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO- **GO ON TO QUESTION 16**

b) How long did you wait? \_\_\_\_\_ HOURS AND/OR \_\_\_\_\_ MINUTES

c) What did you do while you waited? Please be specific.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. To tour the Adams National Historic Site, visitors take ranger-guided tours. For the sites that you and your group visited, on this visit, please check (✓) your opinion about the tour length.

	<b>Too short</b>	<b>About right</b>	<b>Too long</b>
OLD HOUSE (Average of 60 minutes)	_____	_____	_____
BIRTHPLACES (Average of 30 minutes)	_____	_____	_____
UFP CHURCH (Average of 30 minutes)	_____	_____	_____

17. a) Would you be willing to pay a modest fee to take a guided trolley tour of the Adams National Historic Site? Please check (✓) only **one**.

\_\_\_ YES, LIKELY                      \_\_\_ NO, NOT LIKELY                      \_\_\_ NOT SURE

b) Would you be willing to pay a modest fee to take a guided trolley tour of the Quincy Area **and** the Adams National Historic Site? Please check (✓) only **one**.

\_\_\_ YES, LIKELY                      \_\_\_ NO, NOT LIKELY                      \_\_\_ NOT SURE

18. If you were a manager planning for the future of Adams National Historic Site what would you propose? Please be specific.

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19. Is there anything else you and your group would like to tell us about your visit to Adams National Historic Site?

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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.



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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 83844-1133**