

**The  
Visitor Services  
Project**

IMPORTANT

When did you first enter Gettysburg National Military Park this visit?

\_\_\_\_\_ DAY OF THE WEEK (M,T,W,Th,F,S,Su)

\_\_\_ : \_\_\_ TIME OF DAY \_\_\_\_\_ am \_\_\_\_\_ pm

**DIRECTIONS**

This questionnaire is in three parts. The first part begins on page 4 and asks about the places you visited during this trip to Gettysburg National Military Park.

The second part asks about your activities during your visit.

The third part asks questions about you, your group, and your thoughts about Gettysburg National Military Park.

One person in your group should complete the questionnaire. It should take just a few minutes. When you have completed the questionnaire, please seal it with the sticker provided and drop it in any U.S. mailbox--no postage is needed.

**PLEASE GO ON TO PART 1, NEXT PAGE**



**United States Department of the Interior**

**NATIONAL PARK SERVICE**

GETTYSBURG NATIONAL MILITARY PARK  
GETTYSBURG, PENNSYLVANIA 17325

EISENHOWER NATIONAL HISTORIC SITE  
GETTYSBURG, PENNSYLVANIA 17325

IN REPLY REFER TO

July, 1986

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Gettysburg and the Eisenhower farm enjoy, and the places they visit within the park.

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 Gettysburg.

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.

Please be assured that all of the information is confidential. Do not write your name on the questionnaire. 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,

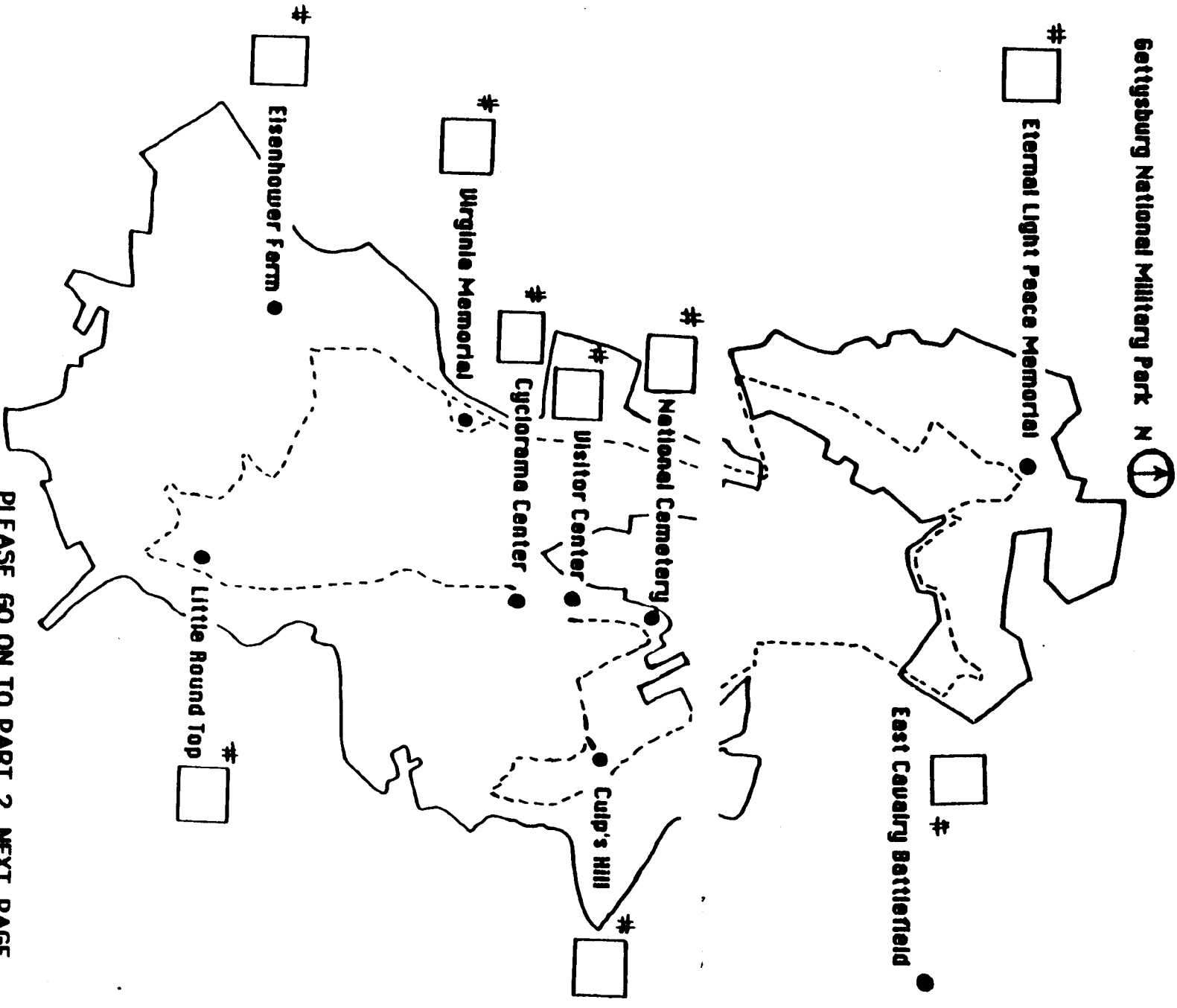
*John R. Earnst*  
John R. Earnst,  
Superintendent

**PART 1: PLACES YOU VISITED**

First, please circle the places you visited on the map below.

Then, please indicate the order in which you visited the places by writing 1st, 2nd, 3rd, and so forth in the box marked '#' beside each site you circled.

If you did not visit any of these places, please go on to part 2, page 6.



PLEASE GO ON TO PART 2, NEXT PAGE

DAY 1 OF YOUR VISIT

1. Please record the **activity** you or your group did for the **most** time each time period. (Please choose activities from the numbered list on page 7).

TIME PERIODS	ACTIVITY (Number)
Sunrise (6 am-8 am)	_____
Early morning (8 am-10 am)	_____
Late morning (10 am-12 noon)	_____
Early afternoon (12 noon-3 pm)	_____
Late afternoon (3 pm-5pm)	_____
Early evening (5 pm-7pm)	_____
Late evening (7 pm-9 pm)	_____

2. Did you stay overnight in the Gettysburg area?

\_\_\_\_\_ YES → PLEASE GO ON TO NEXT PAGE

\_\_\_\_\_ NO → PLEASE GO ON TO PART 3, PAGE 8

1. Please record the **activity** you or your group did for the **most** time each time period. (Please choose activities from the numbered list below).

TIME PERIODS	ACTIVITY (Number)
Sunrise (6 am-8 am)	_____
Early morning (8 am-10 am)	_____
Late morning (10 am-12 noon)	_____
Early afternoon (12 noon-3 pm)	_____
Late afternoon (3 pm-5 pm)	_____
Early evening (5 pm-7 pm)	_____
Late evening (7 pm-9 pm)	_____

PLEASE GO ON TO PART 3, NEXT PAGE

ACTIVITIES	
1. Motorized travel on park roads	7. Licensed Battlefield guide tour
2. Picnicking/eating	8. Bus/ cassette tour
3. Hiking/walking	9. Historical research
4. Attending interpretive programs (talks, films, etc.)	10. Photography/nature study
5. Viewing interpretive facilities (exhibits, museum, etc.)	11. Resting/relaxing
6. Bicycling or jogging	12. Other: _____

PART 3: YOU AND YOUR OPINIONS

We hope you enjoyed your visit to Gettysburg National Military Park. Below are several questions that will help us learn about the people who participated in the study and their thoughts about the park.

1. How many hours did you spend in Gettysburg National Military Park this visit?

\_\_\_\_\_ NUMBER OF HOURS

2. How many people were in your group?

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

3. What kind of group were you with?

\_\_\_\_\_ ALONE

\_\_\_\_\_ FAMILY

\_\_\_\_\_ FRIENDS

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

\_\_\_\_\_ GUIDED TOUR GROUP

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

4. For yourself and the other members of 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 Gettysburg National Military Park including this trip.

	AGE	ZIP CODE (COUNTRY)	*TIMES VISITED
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
additional members:	_____		
	_____		

5. During this visit, did you view the draft of the Gettysburg address or visit the actual site where the address was delivered? (Check all that apply.)

\_\_\_\_\_ VIEWED THE DRAFT

\_\_\_\_\_ VISITED THE SITE

\_\_\_\_\_ NEITHER OF THE ABOVE

6. a. During this visit, did you use any of the following services at Gettysburg National Military Park? (Please check all that apply.)

b. Of the services you used, which do you feel were most useful? (Please mark each checked service with a rating (1=EXTREMELY USEFUL; 2=VERY USEFUL; 3=MODERATELY USEFUL; 4= SOMEWHAT USEFUL; 5=NOT USEFUL) in the column on the right.)

Use Service? (✓)	Rating? (#)
( ) TOUR CONDUCTED BY A RANGER	( )
( ) PARK TRAVELER INFORMATION STATION (AM Radio 1610)	( )
( ) SELF-GUIDED HIKING TRAIL BROCHURES	( )
( ) SELF-GUIDED AUTO TOUR BROCHURES	( )
( ) AUDIO MESSAGES	( )
( ) ELECTRIC MAP PROGRAM	( )
( ) TOUR BY LICENSED BATTLEFIELD GUIDE	( )
( ) TOUR BY BUS WITH CASSETTE TAPE	( )
( ) VISITOR CENTER BOOKSTORE	( )
( ) OTHER: _____	( )

7. Several of the guided or self-guided tours of Gettysburg National Military Park have stops that match the sequence of events during the battle of Gettysburg. Do you feel that making these stops in order is important for understanding the battle?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

\_\_\_\_\_ NO OPINION

8. How did you locate Gettysburg National Military Park? (Please check all that apply.)

\_\_\_\_\_ ROAD SIGNS

\_\_\_\_\_ GUIDEBOOK OR MAP

\_\_\_\_\_ WROTE TO PARK OFFICE FOR INFORMATION

\_\_\_\_\_ USED PARK TRAVELER INFORMATION STATION (AM Radio 1610)

\_\_\_\_\_ ASKED LOCAL RESIDENT FOR DIRECTIONS

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

9. One of the goals of Gettysburg National Military Park is to maintain the battlefield in a pre-battle appearance and the Eisenhower Farm in a 1951-1969 appearance. While you were visiting the park, were you distracted by modern buildings or structures?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

How? (Please explain: \_\_\_\_\_)

10. Is there anything else you would like to tell us about your trip to Gettysburg National Military Park?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Thank you for your help. Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox--no postage is needed.