

National Capital Region Visitor Survey

[Park Site Name Here] 2020

PAPERWORK REDUCTION and PRIVACY ACT STATEMENT: The Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. We are authorized by the National Park Service Protection Interpretation and Research in System (54 USC §100702) to collect this information. The routine uses of this information will be for the benefit of NPS Managers and Planning staff at Harpers Ferry National Historical Park (HAFE) in future initiatives related to the visitor use to understand rock climber perceptions of climbing management within the park. The data collected will be summarized to evaluate visitor uses and expectations during their visit at HAFE. Your responses to this collection are completely voluntary and will remain anonymous. You can end the process at any time and will not be penalized in any way for choosing to do so. Your participation poses only minimal risks. Data collected will only be reported in aggregates and no individually identifiable responses will be reported. A Federal agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a currently valid OMB Control Number (1024-0224).

BURDEN STATEMENT: The average time is 15 minutes to complete and return this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Dr. Chris Zajchowski, Assistant Professor, czajchow@odu.edu; or Phadrea Ponds NPS Information Collection Clearance Officer at pponds@nps.gov.

SECTION 1: YOUR PAST USE OF [Park Site Name Here]

Please tell us about your past visitation to [Park Site Name Here]

- a. How many **days in the last month** (30 days) have you visited the park? _____
 - b. How many **days in the last year** (12 months) have you visited the park? _____
 - c. How many **years** (total) have you visited the park? _____
1. On your most recent visit, how long did you and your personal group spend visiting [Park Site Name Here]? Please list partial hours / days as $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$.
- _____ Number of hours, if fewer than 24 hours
OR
_____ Number of days, if 24 hours or more
- On your most recent visit, [Park Site Name Here] was the primary destination
 On your most recent visit, [Park Site Name Here] was one of several destinations
 On your most recent visit, [Park Site Name Here] was not a planned destination
2. On your most recent visit to [Park Site Name Here], which of the following sites did you and your personal group visit? **Please mark all that apply.**

Specific park site areas listed here

3. On your most recent visit, what kind of personal group (not guided tour/school group) were you with? Please mark **only one**.
- Alone Friends and family
 Family Other (please specify) _____
 Friends

SECTION 2: YOUR MOTIVATIONS AND ACTIVITIES

4. On your most recent visit, what was the primary reason that you and your personal group visited [Park Site Name Here]? Please mark **one**.
- Business
 Passing through – unplanned visit
 To recreate
 To visit [Park Site Name Here]
 To visit other NPS site
 To visit other area attractions
 To visit friend/relative in the area
 Other (please specify) _____

Note to Reviewers: Below is a list of activities that generally occur in the parks of the National Capital Region. The surveys in each location will be adapted to be park/site specific.

5. Which activities have you and your personal group participated in within **[Park Site Name Here]**? Please mark **all** that apply.

<input type="checkbox"/> Attended ranger-led programs	<input type="checkbox"/> Hiking
<input type="checkbox"/> Auto-tour	<input type="checkbox"/> Learn about historic events
<input type="checkbox"/> Bird watching	<input type="checkbox"/> Photography/videos
<input type="checkbox"/> Camping	<input type="checkbox"/> Picnicking
<input type="checkbox"/> Dog walking	<input type="checkbox"/> Walking
<input type="checkbox"/> Enjoy nature	<input type="checkbox"/> Scenic driving
<input type="checkbox"/> Enjoy history	<input type="checkbox"/> Star gazing
<input type="checkbox"/> Fishing	<input type="checkbox"/> Other (Please specify) _____

5b. Which one of the above activities is the primary activity in which you and your personal group have participated in at **[Park Site Name Here]**?

SECTION 3: YOUR RECREATION PREFERENCES

6. a. Please mark **all** the services and facilities that you and your personal group **used** during your most recent visit **[Park Site Name Here]**.
 b. Next, for only those services and facilities you and your personal group **used**, please rate their importance from 1-5.
 c. Finally, for only those services and facilities that you and your personal group **used**, please rate their quality from 1-5.

Note to Reviewers: Below is a list of services/facilities/attributes that generally occur in the parks of the National Capital Region. The surveys in each location will be adapted to be park/site specific.

Service / facility used	If used, how important? <i>1 = Not at all important 2 = Slightly important 3 = Moderately</i>	If used, what quality? <i>1 = Very poor 2 = Poor 3 = Average</i>

	<i>important</i> 4 = <i>Very important</i> 5 = <i>Extremely important</i>	4 = <i>Good</i> 5 = <i>Very good</i>
<input type="checkbox"/> No services/facilities used	n/a	n/a
<input type="checkbox"/> Bathrooms	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Handicap accessible trails	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Hiking trails	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Parking lots	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Visitor Center	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> NPS map	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Historic structures	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Kiosks - informational signage	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Ranger-led programs	1 2 3 4 5	1 2 3 4 5

7. a. For all park attributes listed below, please rate how **important** they are for maintaining a quality park experience.
b. Next, for all park attributes listed below, please rate their **quality** during your most recent visit to **[Park Site Name Here]**.

Attributes and Resources	How important? 1 = <i>Not at all important</i> 2 = <i>Slightly important</i> 3 = <i>Moderately important</i> 4 = <i>Very important</i> 5 = <i>Extremely important</i>	What quality? 1 = <i>Very poor</i> 2 = <i>Poor</i> 3 = <i>Average</i> 4 = <i>Good</i> 5 = <i>Very good</i> 6 = <i>Cannot rate the quality</i>
Historical preservation	1 2 3 4 5	1 2 3 4 5 6
Recreational access	1 2 3 4 5	1 2 3 4 5 6
Clean air	1 2 3 4 5	1 2 3 4 5 6
Clean water	1 2 3 4 5	1 2 3 4 5 6
Opportunities for solitude	1 2 3 4 5	1 2 3 4 5 6
Opportunities for family bonding	1 2 3 4 5	1 2 3 4 5 6
Natural sounds	1 2 3 4 5	1 2 3 4 5 6
Nature preservation	1 2 3 4 5	1 2 3 4 5 6

SECTION 4: INFORMATION AND AWARENESS

8. Prior to your visit, were you aware that **[Park Site Name Here]** is managed by the National Park Service (NPS)?

- Yes No Not sure

9. a. Would you or any member of your personal group prefer to receive information about **[Park Site Name Here]** in languages other than English?

- Yes No

b) If YES, which language(s)? _____

SECTION 5: ABOUT YOU

10. Do you live in the United States? (please check one and fill in the appropriate blank)

- a. Yes (what is your zip code? _____)
b. No (what is your country of origin? _____)

11. What year were you born? _____

12. What is your gender? (*select one*)

- Male
 Female

13. What is the highest level of school you have completed? (*select one*)

- Less than high school Some college Graduate or professional degree
 Some high school Two year college graduate Do not wish to answer
 High school graduate Four year college graduate

14. For you only, are you Hispanic or Latino?

- Yes
 No

15. Which of these categories best indicates your race? Answer only for yourself. Please select **one or more**. (*select all that apply*)

- American Indian or Alaska Native Native Hawaiian or other Pacific Islander
 Asian White
 Black or African American Other (please specify) _____

16. Which category best represents your annual household income? **Please mark only one.**

- Less than \$24,999
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 or more
- Do not wish to answer

17. Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

- Never served in the military
- Only on active duty for training in the Reserves or National Guard
- Now on active duty
- On active duty in the past, but not now

18. Is there anything else you would like to add related to your experience and the management of **[Park Site Name Here]**? Please share below.

