**National Capital Area Visitor Survey**

**Wolf Trap National Park for the Performing Arts**

**2021**

**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 Wolf Trap National Park for the Performing Arts (WOTR) in future initiatives related to the visitor use to understand desired visitor experiences. The data collected will be summarized to evaluate visitor uses and expectations during their visit at WOTR. 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 10 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 WOLF TRAP NATIONAL PARK FOR THE PERFORMING ARTS**

1. Please tell us about your past visitation to Wolf Trap National Park for the Performing Arts.

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? \_\_\_\_\_\_\_\_\_\_\_\_\_

d. My most recent visit was my first visit to the park

|  |  |
| --- | --- |
| ⬜ | Yes |
| ⬜ | No |

**(Reviewer Note: This subquestion only appears to people who answered “yes” to 1d in the previous question.)**

**SECTION 1A: FIRST TIME VISITORS**

Please tell us the PRIMARY REASON why you had not visited Wolf Trap National Park for the Performing Arts before your most recent visit (**please mark only one**):

|  |  |
| --- | --- |
| ⬜ | Lodging costs too expensive |
| ⬜ | Dining costs too expensive |
| ⬜ | Other destinations are more interesting |
| ⬜ | Distance is too far from home |
| ⬜ | Park is too crowded |
| ⬜ | Parking is too difficult |
| ⬜ | Ticket costs are too expensive |
| ⬜ | Not interested in the performers |
| ⬜ | Concerns over public health (COVID-19) |
| ⬜ | General concerns about safety |
| ⬜ | Too busy with family responsibilities |
| ⬜ | Could not get transportation to park |
| ⬜ | Park is inaccessible for people with disabilities |
| ⬜ | The amenities I need are not there (grills, water faucets, rest rooms, picnic tables, etc.) |
| ⬜ | The only thing the Park offers is performances |
| ⬜ | Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. On your most recent visit, how long did you and your personal group spend visiting Wolf Trap National Park for the Performing Arts? Please list partial hours / days as ¼, ½, ¾.

\_\_\_\_\_\_\_\_ Number of hours, if fewer than 24 hours

 OR

\_\_\_\_\_\_\_\_ Number of days, if 24 hours or more

❑ On your most recent visit, Wolf Trap National Park for the Performing Artswas the primary destination

❑ On your most recent visit, Wolf Trap National Park for the Performing Artswas one of several destinations

❑ On your most recent visit, Wolf Trap National Park for the Performing Arts was not a planned destination

1. On your most recent visit to Wolf Trap National Park for the Performing Arts, which of the following sites did you and your personal group visit? **Please mark all that apply.**

❑ Filene Center

❑ Children's Theatre-in-the-Woods

❑ Meadow Pavilion

❑ West Lot Picnic Tables

❑ Wolf Trap Trail

❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. 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

1. Does anyone in your personal group have physical conditions that made it difficult to access or participate in park activities or services?

 NO

 YES

If **YES**, on this visit what activities or services did the person(s) have difficulty accessing or participating in?

(Please describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Because of the physical condition, which specific difficulties did the person(s) have? Please select **all** that apply.

 Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with hearing aid)

 Visual (difficulty in seeing exhibits, directional signs, visual aids that are part of programs even with prescribed glasses or due to blindness)

 Mobility (difficult in accessing facilities, services, or programs even with walking aid and/or wheelchairs)

 Other (Please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2: YOUR MOTIVATIONS AND ACTIVITIES**

1. On your most recent visit, what was the primary reason that you and your personal group visited Wolf Trap National Park for the Performing Arts? **Please mark only** **one.**

❑ Business

❑ Passing through – unplanned visit

❑ To recreate

❑ To attend a performance

❑ To visit other NPS site

❑ To visit other area attractions

❑ To visit friend/relative in the area

❑ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Which activities have you and your personal group participated in within Wolf Trap National Park for the Performing Arts? **Please mark all that apply.**

|  |  |
| --- | --- |
| ❑ Attended ranger-led programs | ❑ Hiking  |
| ❑ Attended workshops | ❑ Learning about historic events |
| ❑ Bird watching | ❑ Photography/videos |
| ❑ Performances  | ❑ Picnicking |
| ❑ Dog walking  | ❑ Walking  |
| ❑ Enjoying nature | ❑ Informal driving lessons in parking lot |
| ❑ Enjoying history | ❑ Star gazing |
| ❑ BARK Ranger | ❑ Girl Scout Ranger |
| ❑ Jr Ranger  | ❑ Other (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

7b. Which one of the above activities is the **primary activity** in which you and your personal group have participated in at Wolf Trap National Park for the Performing Arts?

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

**SECTION 3: YOUR RECREATION PREFERENCES**

1. a. **Please mark all** the services and facilities that you and your personal group **used** during your most recent visit to Wolf Trap National Park for the Performing Arts.

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?***1 = Not at all important**2 = Slightly important**3 = Moderately important**4 = Very important**5 = Extremely important* |  | **If used, what quality?***1 = Very poor**2 = Poor**3 = Average**4 = Good**5 = Very good* |
|  ❑ No services/facilities used |  | n/a |  | n/a  |
|  ❑ Bathrooms |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Walking paths |  | 1 2 3 4 5 |  | 1 2 3 4 5 |
|  ❑ Hiking trails |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Open green spaces |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Parking lots |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Visitor Center |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ NPS map |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Kiosks - informational signage |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Ranger-led programs |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Filene Center |  | 1 2 3 4 5 |  | 1 2 3 4 5  |
|  ❑ Children's Theatre-in-the-Woods |  | 1 2 3 4 5 |  | 1 2 3 4 5  |

1. Have you been to a performance at the Filene Center? ❑ yes ❑no
2. (If yes) Please rate the quality of the facilities you used during your most recent visit:

|  |  |
| --- | --- |
| **Filene Center** | *1 = Very poor**2 = Poor**3 = Average**4 = Good**5 = Very good* |
|  ❑ Sound system | 1 2 3 4 5 |
|  ❑ Seating | 1 2 3 4 5  |
|  ❑ Accessibility for people with disabilities | 1 2 3 4 5  |
|  ❑ Stage lighting | 1 2 3 4 5  |
|  ❑ Bathrooms | 1 2 3 4 5  |
|  ❑ Concessions/merchandise/gift shop | 1 2 3 4 5  |

1. Have you been to the Children’s Theatre in the Woods? ❑ yes ❑no
2. (If yes) Please rate the quality of the facilities you used during your most recent visit:

|  |  |
| --- | --- |
| **Children's Theatre-in-the-Woods** | *1 = Very poor**2 = Poor**3 = Average**4 = Good**5 = Very good* |
|  ❑ Sound system | 1 2 3 4 5 |
|  ❑ Seating | 1 2 3 4 5  |
|  ❑ Accessibility for people with disabilities | 1 2 3 4 5  |
|  ❑ Bathrooms | 1. 2 3 4 5
 |

1. (Also appears if “yes” to #9 or #12) Please rate the acceptability of the **amount of time** it takes to do the following for a performance:

|  |  |
| --- | --- |
|  | *-3 = Very unacceptable* *-2 = Moderately unacceptable**-1 = Slightly unacceptable**0 = Neutral**1 = Slightly acceptable**2 = Moderately acceptable**3 = Very acceptable* |
| **Arrive at the park and enter the venue:**15 minutes30 minutes45 minutes60 minutes | -3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3 |
| **Exit the venue and leave the park:**30 minutes45 minutes60 minutes1 hour 30 minutes2 hours | -3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3-3 -2 -1 0 1 2 3 |

**SECTION 4. DESTINATION IMAGE**

1. Please tell us how much you agree or disagree with the following statements about Wolf Trap National Park for the Performing Arts (WOTR):

|  |  |
| --- | --- |
|  | *1 = Strongly Disagree**2 = Disagree**3 = Neutral**4 = Agree**5 = Strongly Agree* |
|  ❑ WOTR facilities were clean and hygienic. | 1 2 3 4 5  |
|  ❑ WOTR staff and volunteers were helpful. | 1 2 3 4 5  |
|  ❑ WOTR has many interesting activities. | 1 2 3 4 5  |
|  ❑ WOTR performances are worth the money spent. | 1 2 3 4 5  |
|  ❑ WOTR has a variety of performers. | 1 2 3 4 5  |
|  ❑ WOTR is a safe place to visit. |  1 2 3 4 5  |
|  ❑ WOTR has beautiful natural scenery in a pastoral setting. | 1 2 3 4 5 |

1. How likely are you to visit Wolf Trap National Park for the Performing Arts again?

**Not at all likely Slightly Likely Moderately Likely Very Likely Extremely Likely**

❑ ❑ ❑ ❑ ❑

Why or why not?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 4: INFORMATION AND AWARENESS**

1. Prior to your visit, were you aware that Wolf Trap National Park for the Performing Arts is managed by the National Park Service (NPS)?

❑ Yes ❑ No ❑ Not sure

1. a. Would you or any member of your personal group prefer to receive information about Wolf Trap National Park for the Performing Artsin languages other than English?

❑ Yes ❑ No

b) If YES, which language(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 6: ABOUT YOU**

1. Do you live in the United States? (please check one and fill in the appropriate blank)
	1. Yes (what is your zip code? \_\_\_\_\_\_\_\_\_\_\_\_)
	2. No (what is your country of origin? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
2. What year were you born? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What is your gender? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. 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

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

❑ Yes

❑ No

1. 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) \_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

1. 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

1. Is there anything else you would like to add related to your experience and the management of Wolf Trap National Park for the Performing Arts? Please share below.

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