



Social Science Program
National Park Service
U.S. Department of the Interior

Visitor Services Project

Lincoln Boyhood National Memorial Visitor Study



OMB Control Number: 1024-0224
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IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE
Lincoln Boyhood National Memorial
2916 E. South Street
PO Box 1816
Lincoln City, IN 47552



Summer 2012

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the expectations, opinions, and interests of visitors to Lincoln Boyhood National Memorial. This information will assist us in our efforts to better manage this park and to serve you.

This questionnaire is only being given to a select number of visitors, so your participation is very important. It should only take about 20 minutes to complete.

When your visit is over, please complete this questionnaire. Seal it in the postage-paid envelope provided and drop it in any U.S. mailbox.

If you have any questions, please contact Lena Le, NPS VSP Assistant Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-2585, email: lenale@uidaho.edu.

We appreciate your help.

Sincerely,

Kendell Thompson
Superintendent

DIRECTIONS

At the end of your visit:

1. Please have the selected individual (at least 16 years old) complete this questionnaire.
2. Answer the questions carefully since each question is different.
3. For questions that use circles (○), please mark your answer by filling in the circle with **black or blue ink**. Please do not use pencil.

Like this: ● Not like this: ✓ ✗ / ⊙

4. Seal it in the postage-paid envelope provided.
5. Drop it in a U.S. mailbox.

Paperwork Reduction 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. This information will be used by the National Park Service as authorized by 16 U.S.C. 1a-7. We will use this information to evaluate visitor services managed by Lincoln Boyhood National Memorial. Your response is voluntary. Your name and contact information have been requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed and will in no way be connected with the results of this survey. 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. We estimate that it will take about 20 minutes to complete this. You may send comments concerning the burden estimates or any aspect of this information collection to: Lena Le, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: lenale@uidaho.edu

Your Visit To Lincoln Boyhood National Memorial

NOTE: In this questionnaire, your **personal group** is defined as you and anyone with whom you are visiting the park, such as a spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as a school, church, scout, or tour group.

1. a) Prior to this visit, how did your personal group obtain information about Lincoln Boyhood National Memorial (NMEM)? Please mark (●) **all** that apply in column (a).

Did not obtain information prior to visit → **Go to part (b) of this question**

- b) If you were to visit Lincoln Boyhood NMEM in the future, how would your personal group prefer to obtain information about the park? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Source of information
<input type="radio"/>	<input type="radio"/>	Cell phone apps for travel/tourism or GPS device
<input type="radio"/>	<input type="radio"/>	Friends/relatives/word of mouth
<input type="radio"/>	<input type="radio"/>	Lincoln Boyhood NMEM website: www.nps.gov/libo
<input type="radio"/>	<input type="radio"/>	Other websites — which one(s)? _____
<input type="radio"/>	<input type="radio"/>	Local businesses (hotels, motels, restaurants, etc.)
<input type="radio"/>	<input type="radio"/>	Maps/brochures
<input type="radio"/>	<input type="radio"/>	Other units of the National Park System (NPS)
<input type="radio"/>	<input type="radio"/>	Previous visits
<input type="radio"/>	<input type="radio"/>	Social media (such as Facebook, Twitter, etc.)
<input type="radio"/>	<input type="radio"/>	State welcome center/visitors bureau/chamber of commerce
<input type="radio"/>	<input type="radio"/>	Travel guides/tour books (such as AAA, etc.)
<input type="radio"/>	n/a	Other, this visit (Specify) _____
n/a	<input type="radio"/>	Other, future visit (Specify) _____

2. There are two Lincoln parks in Lincoln City: Lincoln Boyhood NMEM is a unit of National Park System and Lincoln State Park is managed by Indiana Department of Natural Resources. **Prior to this visit**, were you aware of two different Lincoln parks?

Yes No

3. a) Were all members of your personal group residents of the area within 60 miles of Lincoln Boyhood NMEM?

No Yes → **Go to Question 4**

b) Was visiting Lincoln Boyhood NMEM the primary reason that nonresident members of your personal group came to the area (within 60 miles)?

- Yes No

4. Which other attractions in the local area did your personal group visit? Please mark (●) all that apply.

- None → **Go to Question 5**
- Lincoln State Park Holiday World/Splashin' Safari
- Lincoln Pioneer Village Lincoln City Post Office
- Other (Please specify) _____

5. a) On this trip, did anyone in your personal group stay overnight **away from** their **permanent residence** in the Lincoln Boyhood NMEM **area** (within 60 miles of the park)?

- Yes No → **Go to Question 6**

b) If YES, how many nights were spent in the Lincoln Boyhood NMEM **area** (within 60 miles of the park).

_____ Number of nights

c) Where and in which type(s) of accommodations did your personal group spend the night(s) in the **area**? Please mark (●) **all** that apply for each location.

Accommodation	Location			
	Rockport/ Owensboro	Santa Clause/Dale	Evansville	Jasper
Lodge, hotel, motel, vacation rental, B&B, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RV/trailer camping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tent camping in developed campground	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seasonal residence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residence of friends or relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Please specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. a) For nonresident members in your personal group, what was the method of transportation used to travel most of the distance from home to the Lincoln Boyhood NMEM area (within 60 miles of the park)? Please mark (●) **one**.

- Car
- Motorcycle
- SUV/truck/van
- Motorhome
- Airplane
- Other (Please specify) _____

b) What was your primary destination on this trip?

- Lincoln Boyhood NMEM - **OR** - Location _____
(Place, city, & state)

10. a) On this visit, in which activities did your personal group participate within Lincoln Boyhood NMEM? Please mark (●) **all** that apply in column (a).

b) If you were to visit the park in the future, in which activities would your personal group prefer to participate within the park? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Activity
<input type="radio"/>	<input type="radio"/>	Attending pioneer demonstrations at Living Historical Farm
<input type="radio"/>	<input type="radio"/>	Attending ranger-led talks/programs
<input type="radio"/>	<input type="radio"/>	Learning history
<input type="radio"/>	<input type="radio"/>	Nature study (birdwatching, wildflower viewing, etc.)
<input type="radio"/>	<input type="radio"/>	Participating in Junior Ranger program
<input type="radio"/>	<input type="radio"/>	Picnicking
<input type="radio"/>	<input type="radio"/>	Shopping in park bookstore
<input type="radio"/>	<input type="radio"/>	Viewing exhibits
<input type="radio"/>	<input type="radio"/>	Visiting the Living Historical Farm
<input type="radio"/>	<input type="radio"/>	Visiting the visitor center
<input type="radio"/>	<input type="radio"/>	Walking/hiking
<input type="radio"/>	<input type="radio"/>	Watching the film
<input type="radio"/>	n/a	Other – this visit (Specify) _____
n/a	<input type="radio"/>	Other – future visit (Specify) _____

- c) Which **one** of the above activities was the primary reason your personal group visited Lincoln Boyhood NMEM on this visit?
-

11. a) During this visit to Lincoln Boyhood NMEM, did your personal group have any personal interaction with a park ranger other than on the tour?

Yes No → **Go to Question 12**

- b) If YES, on a scale from 1 to 5, please rate the quality of your interaction with the park ranger. Please mark (●) **one** response for each item.

	Very poor	Poor	Average	Good	Very good
Helpfulness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Courteousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of information provided	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. a) Which places did your personal group visit at Lincoln Boyhood NMEM during this trip? Please mark (●) **all** that apply.

- | | |
|---|--|
| <input type="radio"/> Exhibits shelter | <input type="radio"/> Animals in the pasture |
| <input type="radio"/> Lincoln Spring Trail | <input type="radio"/> Boyhood Nature Trail |
| <input type="radio"/> Memorial Visitor Center | <input type="radio"/> Cabin Site Memorial |
| <input type="radio"/> Nancy Lincoln's Grave Site | <input type="radio"/> Lincoln Boyhood Trail |
| <input type="radio"/> Picnic area (at visitor center) | <input type="radio"/> Living Historical Farm |
| <input type="radio"/> Trail of Twelve Stones | <input type="radio"/> Picnic area (at shelter) |

- b) On this trip, which area of Lincoln Boyhood NMEM did your personal group visit **first**? Please mark (●) **only one**.

Memorial Visitor Center area Living Historical Farm area

13. a) On this visit to Lincoln Boyhood NMEM, did your personal group attend any ranger-led programs/talks?

Yes No → **Go to Question 14**

If YES, please rate the following aspects of the program/talk. Please mark (●) **one** for each aspect.

b) Program length Too short About right Too long

c) Topics discussed on program Of interest Not of interest

d) Is there any aspect of the story that needs to be strengthened?

No Yes → e) Please be specific. _____

14. a) On a future visit to Lincoln Boyhood NMEM, would your personal group be interested in attending ranger-led programs? Please mark (●) **one**.

Yes, likely No, unlikely → **Go to Question 15**

b) If YES, what length of program would you like to attend? Please mark (●) **one**.

Under 1/2 hour 1/2 - 1 hour 1 - 2 hours

Other (from _____ to _____)

c) What time of day would be most suitable for your personal group to attend a ranger-led program/talk? Please mark (●) **one**.

Between 8am and 10am Between 10am and noon

After noon to 2pm Between 2pm to 4pm

Other (Please specify) _____

d) If your personal group were to visit Lincoln Boyhood NMEM in the future, which topics would you like to learn about in interpretive programs? Please mark (●) **all** that apply.

Not interested in interpretive programs → **Go to Question 15**

Lincoln's education National Park Service

Lincoln family Natural resources

Milk sickness Park history

Pioneer skills Thomas Lincoln Cabinets

Other (Please specify) _____

15. a) Please mark (●) **all** the visitor services and facilities that your personal group **used** at Lincoln Boyhood NMEM during this visit.
- b) For only those services and facilities that your personal group **used**, please rate their **importance** to your visit from 1-5.
- c) For only those services and facilities that your personal group **used**, please rate their **quality** from 1-5.

a) Services/facilities used	b) If used, how important?	c) If used, what quality?
Mark (●)	1=Not at all important 2=Slightly important 3=Moderately important 4=Very important 5=Extremely important	1=Very poor 2=Poor 3=Average 4=Good 5=Very good
<input type="radio"/> Access for people with disabilities	_____	_____
<input type="radio"/> Assistance from visitor center staff	_____	_____
<input type="radio"/> Bookstore sales items (selection, price, etc.)	_____	_____
<input type="radio"/> Junior Ranger program	_____	_____
<input type="radio"/> Museum exhibits	_____	_____
<input type="radio"/> Orientation film	_____	_____
<input type="radio"/> Park brochure/map	_____	_____
<input type="radio"/> Parking	_____	_____
<input type="radio"/> Picnic areas	_____	_____
<input type="radio"/> Pioneer demonstrations at Living Historical Farm	_____	_____
<input type="radio"/> Ranger or volunteer-led programs	_____	_____
<input type="radio"/> Restrooms	_____	_____
<input type="radio"/> Trail guides	_____	_____
<input type="radio"/> Trails	_____	_____
<input type="radio"/> Visitor center (cleanliness, maintenance, etc.)	_____	_____

d) Which items would your personal group would like to have available for purchase at the visitor center bookstore on a future visit? Please mark (●) **all** that apply.

Additional publications (books, brochures, etc.)

List subject that you are interested in _____

Souvenir items (tee shirts, etc.)

Convenience items (disposable cameras, batteries, bottled water, etc.)

Other (Please specify) _____

16. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to your personal group at Lincoln Boyhood NMEM during this visit? Please mark (●) **one**.

Very poor

Poor

Average

Good

Very good

17. If you were to visit Lincoln Boyhood NMEM in the future, how would your personal group prefer to learn about cultural and natural history/features of Lincoln Boyhood NMEM? Please mark (●) **all** that apply.

Not interested in learning about the park → **Go to Question 18**

Audiovisual programs (DVD, video, or audio)

Cell phone tour

Indoor exhibits

Outdoor exhibits

Interactive computer programs

Ranger-led programs

Park website: www.nps.gov/libo

Smart phone apps

Social media (Facebook, Twitter, etc.)

Special events

Volunteer opportunities

Hands-on activities with touchable subjects/artifacts

Living history demonstrations/costumed interpretive programs

Other electronic media (downloadable digital files, podcasts, etc.)

Self-guided tour with printed materials (brochures, books, maps, etc.)

Other (Please specify) _____

18. On this visit to Lincoln Boyhood NMEM, how did your personal group pay the entrance fee? Please mark (●) **one**.

- Were not aware that entrance fee is required
- Were aware that entrance fee is required, but we didn't go inside the visitor center
- Were aware that entrance fee is required, but believed the fee was included in the Lincoln State Park fee
- Cash/check
- Interagency Pass/Senior Pass/Access

19. a) Prior to receiving this questionnaire, was anyone in your personal group aware of other nationally significant sites that commemorate the life and legacy of Abraham Lincoln? Please mark (●) **Yes or No** for each site.

b) Has anyone in your personal group ever visited these sites or do you have a plan to visit in the future? Please mark (●) **all** that apply for each site.

a) Aware of site?		b) Visited or planned to visit?			
Yes	No	Not interested in visiting	Visited in the past	Visiting on this trip	Plan to visit in the future
<input type="radio"/>	<input type="radio"/>				
<input type="radio"/>	<input type="radio"/>				
<input type="radio"/>	<input type="radio"/>				
<input type="radio"/>	<input type="radio"/>				

c) How important were the following factors in your personal group's decision to visit Lincoln Boyhood NMEM? Please mark (●) **one** for each factor.

Factor	Not at all important	Slightly important	Moderately important	Very important	Extremely important
A national park site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A Lincoln related site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A place to get off the highway	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Something else to do while we were in the area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. For your personal group, please estimate expenditures for the items listed below for this visit to Lincoln Boyhood NMEM and the surrounding **area** (within 60 miles of the park). **Please write "0" if no money was spent in a particular category.**

- a) Please list your personal group's total expenditures inside Lincoln Boyhood NMEM.
- b) Please list your personal group's total expenditures in the **surrounding area** outside the park (within 60 miles of the park).

NOTE: Surrounding area residents should only include expenditures that were **just for this trip** to Lincoln Boyhood National Memorial.

	EXPENDITURES	
	a) Inside park	b) Outside park
Spent no money (●)	<input type="radio"/> → Go to (b)	<input type="radio"/> → Go to (c)
Lodge, hotel, motel, cabin, B&B, etc.	n/a	\$ _____
Lincoln State Park camping fee	n/a	\$ _____
Other camping fees and charges	n/a	\$ _____
Restaurants and bars	n/a	\$ _____
Groceries and takeout food	n/a	\$ _____
Gas and oil (auto, RV, boat, etc.)	n/a	\$ _____
Other transportation expenses (rental cars, auto repairs, but NOT airfare)	n/a	\$ _____
Holiday World admission fees	n/a	\$ _____
Other admission, entertainment fees	\$ _____	\$ _____
All other expenditures (souvenirs, books, postcards, sporting goods, clothing, donations, etc.)	\$ _____	\$ _____

c) How many people do the above expenses cover?
 _____ Adults (18 years or over) _____ Children (under 18 years)
 Please write "0" if no children were covered by the expenditures.

21. a) What did your personal group like **most** about your visit to Lincoln Boyhood NMEM?

b) What did your personal group like **least** about your visit to Lincoln Boyhood NMEM?

22. a) For you only, which category best represents your annual **household** income? Please mark (●) only **one**.

- | | | |
|--|---|---|
| <input type="radio"/> Less than \$24,999 | <input type="radio"/> \$50,000-\$74,999 | <input type="radio"/> \$150,000-\$199,999 |
| <input type="radio"/> \$25,000-\$34,999 | <input type="radio"/> \$75,000-\$99,999 | <input type="radio"/> \$200,000 or more |
| <input type="radio"/> \$35,000-\$49,999 | <input type="radio"/> \$100,000-\$149,999 | <input type="radio"/> Do not wish to answer |

b) How many people are in your household? _____ Number of people

c) How much income did your household forgo to make this trip (due to taking unpaid time off from work)? Mark (●) "None" or specify the amount forgone.

None - **OR** - Amount forgone \$ _____

23. On this visit, was your personal group part of the following types of organized groups? Please mark (●) **one** for **each**.

- | | | |
|---------------------------------------|---------------------------|--------------------------|
| a) Commercial guided tour group | <input type="radio"/> Yes | <input type="radio"/> No |
| b) School/educational group | <input type="radio"/> Yes | <input type="radio"/> No |
| c) Other (scouts, work, church, etc.) | <input type="radio"/> Yes | <input type="radio"/> No |

d) If you were with one of these organized groups, how many people, including yourself, were in this group?

_____ Number of people in organized group

24. a) On this visit, which type of personal group (not guided tour/school/other organized group) were you with? Please mark (●) only **one**.

- | | |
|--|--|
| <input type="radio"/> Alone | <input type="radio"/> Friends |
| <input type="radio"/> Family | <input type="radio"/> Family and friends |
| <input type="radio"/> Other (Please specify) _____ | |

b) On this visit, how many people were in your personal group, including yourself?

_____ Number of people in personal group

c) On this visit, how many times did your personal group enter Lincoln Boyhood NMEM during your stay in the area (within 60 miles of the park)?

_____ Number of entries

25. For your personal group on this visit, please provide the following. (If you do not know the answer, please leave it blank).

	a) Current age	b) U.S. ZIP code or name of country other than U.S.	c) & d) Number of visits to Lincoln Boyhood NMEM (including this visit)	
			c) Past 12 months	d) Lifetime
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

26. For you only, what is the highest level of education you have completed? Please mark (●) **one**.

- Some high school
- High school diploma/GED
- Some college
- Bachelor's degree
- Graduate degree

27. Is there anything else your personal group would like to tell us about your visit to Lincoln Boyhood NMEM?

Thank you for your help! Please seal the questionnaire in the postage-paid envelope provided and drop it in any U.S. mailbox.

OFFICIAL BUSINESS

**Visitor Services Project
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
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