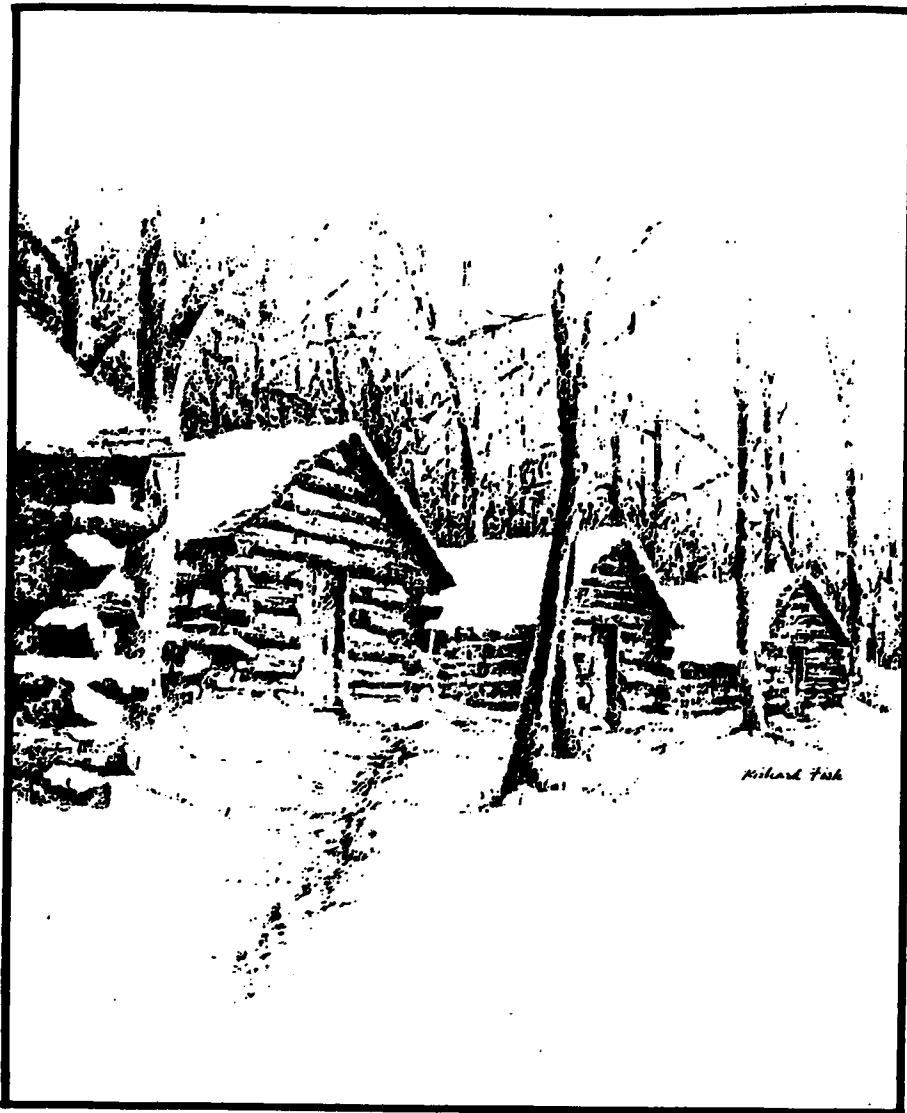


28  
**Valley Forge Visitor Study**



**The  
Visitor Services  
Project**

OMB approval 10-24-0036

IMPORTANT

When did you first enter Valley Forge National Historical Park this visit?

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

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

DIRECTIONS

The first part of this questionnaire is a diary of your visit to Valley Forge National Historical Park. The second part asks some brief questions about you, your group, and your thoughts about the park. One person in your group should complete the questionnaire.

The diary is on page 7. Please fill out the diary only for the time you spend in Valley Forge National Historical Park this visit. It should take just a few minutes to complete; there are two simple steps:

First, find the zone(s) of the park you spent time in, which you can identify from the map on pages 4-5, and enter them in the diary.

Second, enter your activities in each zone ( a list of activities is provided on page 6.)

The second part of the questionnaire begins on page 8. Please answer each question. 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.



United States Department of the Interior  
NATIONAL PARK SERVICE

VALLEY FORGE NATIONAL HISTORICAL PARK  
P. O. Box 933  
VALLEY FORGE, PA 19481-0933

DO NOT REPLY REFER TO:

August, 1986

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Valley Forge 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 Valley Forge.

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.

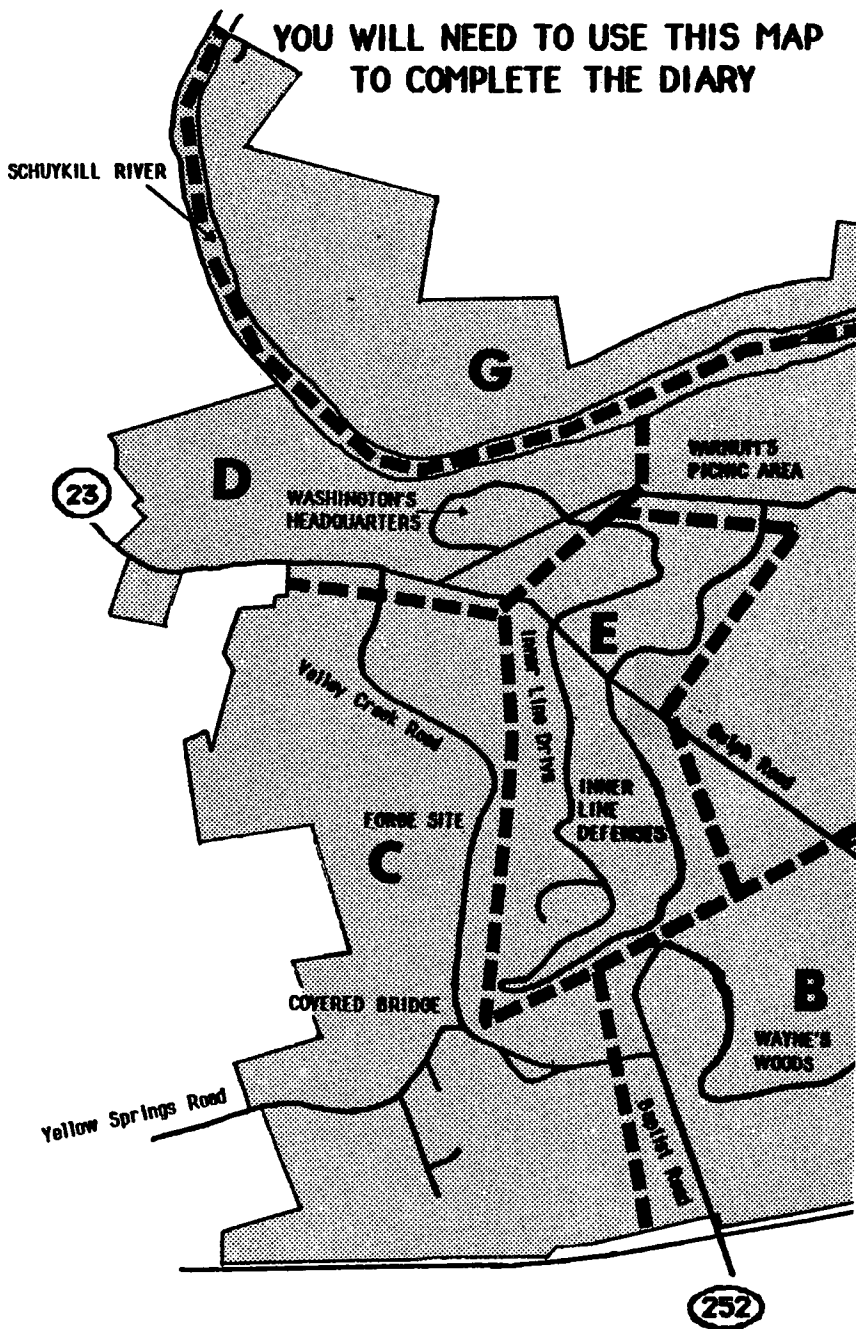
Please be assured that all of the information is confidential. Do not write your name on the questionnaire. If you have any questions, please contact Dr. Gary E. Machlis, Sociology Project Leader, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83843.

We appreciate your help.

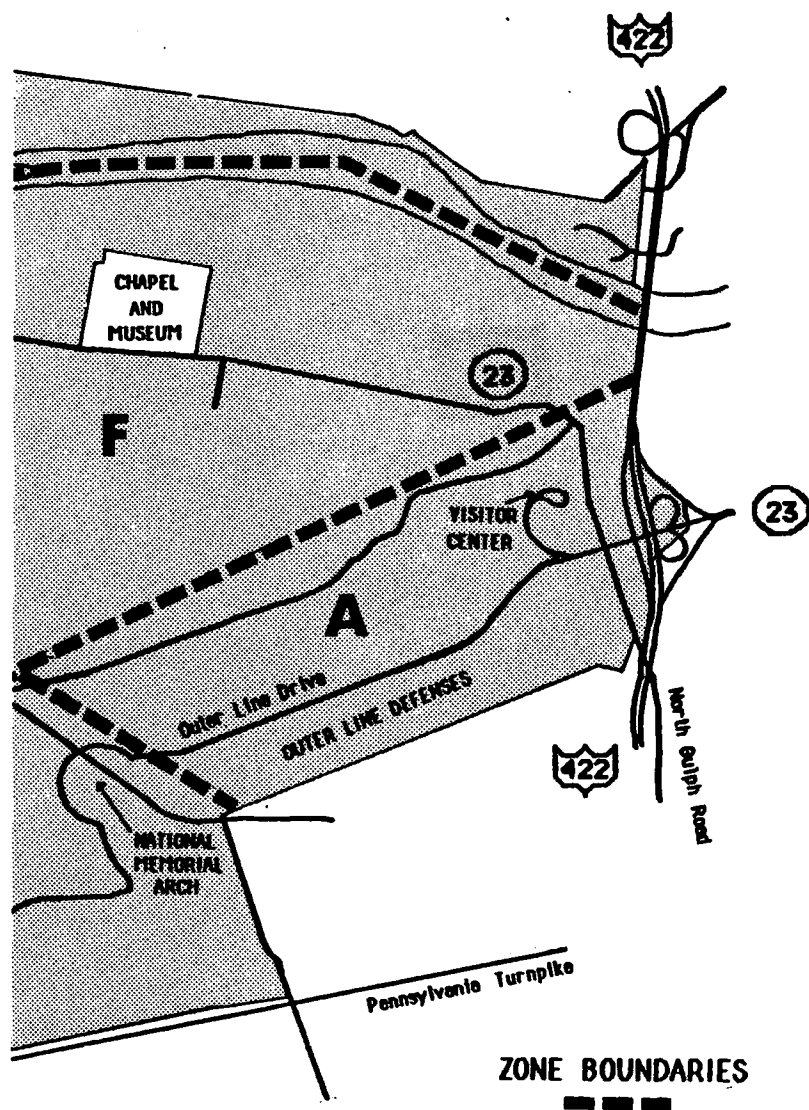
Sincerely,

*Wallace B. Elms*  
Wallace B. Elms,  
Superintendent

YOU WILL NEED TO USE THIS MAP TO COMPLETE THE DIARY



Valley Forge National Historical Park N



ZONE BOUNDARIES

YOU WILL NEED TO USE THIS LIST  
TO COMPLETE THE DIARY

ACTIVITIES

1. Picnicking
2. Visiting historic buildings
3. Horseback riding
4. Nature study/photography
5. Bicycling
6. Walking/hiking
7. Jogging
8. Viewing interpretive exhibits and/or signs
9. Attending interpretive talks, films, tours, etc.
10. Outdoor hobbies or sports (model airplanes, frisbee, etc.)
12. Relaxing (sunbathing, reading, etc.)
13. Other (Please describe: \_\_\_\_\_)

DIARY OF YOUR VISIT

Please record the **zone** in which you spent the most time each time period and the **activity** you did for the most time in that zone.

*Zones are shown on the map on pages 4-5. Activities are listed on page 6. Please indicate only one zone and one activity in which you spent the most time.*

TIME PERIODS	ZONE (Letter)	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)	_____	_____

PLEASE GO ON TO PART 2, NEXT PAGE

## PART 2

We hope you enjoyed your visit to Valley Forge National Historical 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 Valley Forge National Historical 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 Valley Forge National Historical Park including this trip.

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

additional members: \_\_\_\_\_

5. Which route did you use to enter Valley Forge National Historical Park?

\_\_\_\_\_ PA #23 or U.S. #422 (FROM THE EAST)

\_\_\_\_\_ PA #23 (FROM THE WEST)

\_\_\_\_\_ PA #252

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

\_\_\_\_\_ )

6. In the past year, how often have you visited Valley Forge National Historical Park?

- ONCE
- A FEW TIMES
- ONCE A MONTH OR MORE
- ONCE A WEEK OR MORE
- VISIT DAILY

7. Which of the following services did you use at Valley Forge National Historical Park this visit? (Check all that apply.)

- TOUR CONDUCTED BY A RANGER
- SELF-GUIDED AUTO TOUR
- EXHIBITS/SIGNS/HISTORIC BUILDINGS
- VISITOR CENTER
- NONE OF THE ABOVE

8. During this visit, did other visitors and their activities interfere with your visit to Valley Forge National Historical Park?

- YES
- NO

How? (Please explain.)

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9. Is there anything else you would like to tell us about your visit to Valley Forge National Historical Park?

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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--no postage is needed.