

# Colonial National Historical Park Jamestown Island

## Visitor Study



**The  
Visitor Services  
Project**

OMB Approval 1024-0224 (NPS 01-011)  
Expiration Date: 12/31/01



**United States Department  
of the Interior**  
**NATIONAL PARK SERVICE**  
Colonial National Historical Park  
P.O. Box 210  
Yorktown, Virginia 23690

IN REPLY REFER TO:



**The Association for the  
Preservation of Virginia  
Antiquities**  
204 W. Franklin Street  
Richmond, Virginia 23220

June 2001

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to the Jamestown Island Unit of Colonial National Historical Park, jointly preserved by the National Park Service and The Association for the Preservation of Virginia Antiquities. This will assist us in our efforts to better develop, manage and protect the park in order to serve you, the visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! Completing it should only take a few minutes of your time after your visit.

When your visit is over, please fill out the questionnaire, seal it with the sticker provided on the last page and drop it in any U.S. mailbox.

If you have any questions about the survey, please contact Margaret Littlejohn, VSP Coordinator, Cooperative Park Studies Unit, College of Natural Resources, University of Idaho, Moscow, Idaho 83844-1133, phone: 208-885-7863, email: [littlej@uidaho.edu](mailto:littlej@uidaho.edu).

We very much appreciate your help.

Sincerely,

Alec Gould  
Superintendent  
Colonial NHP

Elizabeth Kostelny  
Executive Director  
APVA

**DIRECTIONS**

One adult in your group should complete the questionnaire. It should only take a few minutes. When you have completed the questionnaire, please seal it with the sticker provided and drop it in any U.S. mailbox. We appreciate your help.

**PRIVACY ACT and PAPERWORK REDUCTION ACT statement:** 16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your group on the questionnaire. Data collected through visitor surveys may be disclosed to the Department of Justice when relevant to litigation or anticipated litigation, or to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting a violation of law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**Burden estimate statement:** Public reporting burden for this form is estimated to average 12 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

Please go on to the next page ➔

## YOUR VISIT TO JAMESTOWN ISLAND

1. a) **Prior to this visit**, were you aware of the difference between the Jamestown Island unit of the National Park System and Jamestown Settlement, operated by the Commonwealth of Virginia?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO                      \_\_\_\_\_ NOT SURE

- b) On this visit, did you and your group also visit Jamestown Settlement?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO → If NO, why not? \_\_\_\_\_



**Go on to part e of this question**

- c) If YES, did you and your group visit Jamestown Settlement before or after visiting Jamestown Island? Please check (✓) **all** that apply.

\_\_\_\_\_ BEFORE                      \_\_\_\_\_ AFTER

- d) In what order would you and your group have preferred to visit Jamestown Island and Jamestown Settlement?

List your preferred **order** (1, 2) to visit or "don't know"

\_\_\_\_\_ JAMESTOWN ISLAND                      \_\_\_\_\_ DON'T KNOW

\_\_\_\_\_ JAMESTOWN SETTLEMENT

- e) In your opinion, should tickets for both Jamestown Island and Jamestown Settlement be available at both locations?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO                      \_\_\_\_\_ NOT SURE

2. a) On this visit, did you and your group also visit Colonial Williamsburg?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO → If NO, why not? \_\_\_\_\_



**Go on to part d of this question**

- b) If YES, did you and your group visit Colonial Williamsburg before or after visiting Jamestown Island? Please check (✓) **all** that apply.

\_\_\_\_\_ BEFORE                      \_\_\_\_\_ AFTER

- c) In what order would you and your group have preferred to visit Jamestown Island and Colonial Williamsburg?

List your preferred **order** (1, 2) to visit or "don't know"

\_\_\_\_\_ JAMESTOWN ISLAND                      \_\_\_\_\_ DON'T KNOW

\_\_\_\_\_ COLONIAL WILLIAMSBURG

- d) In your opinion, should tickets for both Jamestown Island and Colonial Williamsburg be available at both locations?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO                      \_\_\_\_\_ NOT SURE

3. Prior to this visit to Jamestown Island, what sources did you and your group use to obtain information about the site? Please check (✓) **all** that apply.

RECEIVED NO INFORMATION PRIOR TO VISIT → **Go on to Question 4**

PREVIOUS VISIT(S)

WORD OF MOUTH/ FRIENDS/ RELATIVES

TRAVEL GUIDE/ TOUR BOOK

STATE/ LOCAL WELCOME CENTER

TELEVISION/ RADIO PROGRAMS

TELEPHONE/ WRITTEN INQUIRY TO PARK

NEWSPAPER/ MAGAZINE ARTICLES

INTERNET/ WEBSITE (www.nps.gov/colo/home.htm)

OTHER WEBSITE

HIGHWAY SIGNS

OTHER (PLEASE SPECIFY: \_\_\_\_\_)

4. On this visit, what were you and your group's reasons for visiting Jamestown Island? Please check (✓) **all** that apply.

ON VACATION IN THE AREA

LEARN ABOUT JAMESTOWN HISTORY

ON BUSINESS IN THE AREA

VISITING FAMILY/ FRIENDS IN THE AREA

VISIT A NATIONAL PARK SERVICE SITE

VISIT AN ASSOCIATION FOR THE PRESERVATION OF VIRGINIA ANTIQUITIES (APVA) SITE

RECREATION (walking, bicycling, jogging, etc.)

Other (Please describe: \_\_\_\_\_)

5. On this visit, which of the following routes did you and your group use to **arrive at** Jamestown Island? Please check (✓) **all** that apply.

JAMESTOWN ROAD/ ROUTE 31

COLONIAL PARKWAY

FERRY

**Please go on to the next page ➡**

6. a) On this visit, what forms of transportation did you and your group use to **arrive at** Jamestown Island/ Colonial Williamsburg/ Yorktown area? Please check (✓) **all** that apply.

PRIVATE VEHICLE                       RENTAL VEHICLE  
 FERRY     BICYCLE  
 WALK     SHUTTLE  
 BUS  
 OTHER (Please describe: \_\_\_\_\_)

- b) Did you and your group have a private or rental vehicle (automobile, van, pickup, etc.) available to use in the Colonial Williamsburg area?

YES                       NO

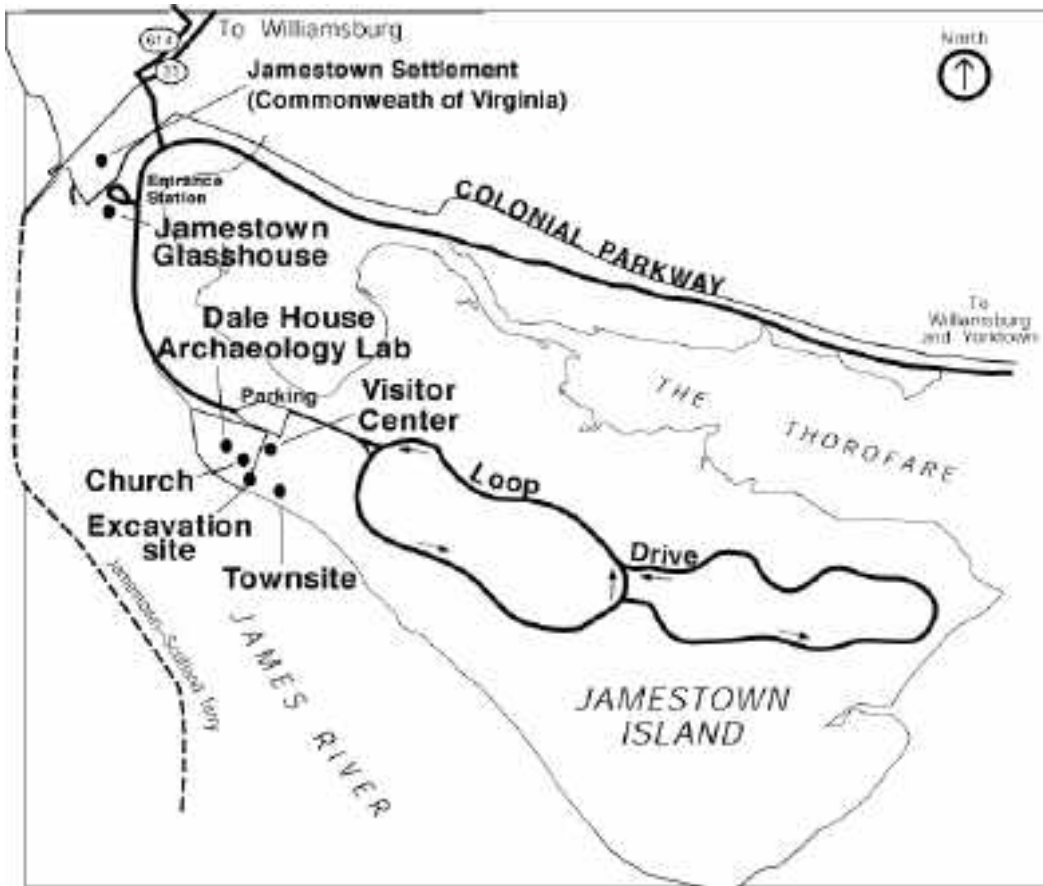
- c) On this visit, what forms of transportation did you and your group use to **leave** the Jamestown Island/ Colonial Williamsburg/ Yorktown area? Please check (✓) **all** that apply.

PRIVATE VEHICLE                       RENTAL VEHICLE  
 FERRY     BICYCLE  
 WALK     SHUTTLE  
 BUS  
 OTHER (Please describe: \_\_\_\_\_)

7. For this visit, please list the order in which you and your group visited the following places on Jamestown Island. Use the map on the next page to help you locate the places. Please write 1, 2, 3, and so forth on the line beside each place you visited.

**Order visited (1, 2, 3,...)**

JAMESTOWN VISITOR CENTER (jointly run by National Park Service and The Association for the Preservation of Virginia Antiquities)  
 DALE HOUSE ARCHAEOLOGICAL LABORATORY  
 LOOP DRIVE  
 TOWNSITE  
 CHURCH  
 ARCHAEOLOGICAL EXCAVATION SITE  
 JAMESTOWN GLASSHOUSE



8. a) During this trip, how much time did you and your group spend at Jamestown Island?

\_\_\_\_\_ NUMBER OF HOURS (Please list partial hours as 1/4, 1/2, etc.)

b) Did you visit Jamestown Island on more than one day on this trip?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO → **Go on to part d of this question**



c) If YES, on how many days did you visit?      \_\_\_\_\_ NUMBER OF DAYS

d) On this trip, how long did you stay in the Jamestown Island/ Colonial Williamsburg/ Yorktown area?

\_\_\_\_\_ NUMBER OF DAYS (Please list partial days as 1/4, 1/2, etc.)

9. How did the amount of time you and your group spent at Jamestown Island compare with the time you had planned to stay there? Please check (✓) **one**.

\_\_\_\_\_ SPENT LONGER TIME THAN PLANNED

\_\_\_\_\_ SPENT ABOUT THE TIME PLANNED

\_\_\_\_\_ SPENT LESS TIME THAN PLANNED

**Please go on to the next page ➡**

10. a) On this trip, did you and your group stay overnight away from home within a 1-hour drive of Jamestown Island?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO → **Go on to Question 11**



- b) Please list the number of nights you and your group stayed in the Jamestown Island area (within a 1-hour drive).

NUMBER OF NIGHTS IN JAMESTOWN ISLAND AREA \_\_\_\_\_

- c) In what type of lodging did you and your group spend the night(s)? Please check (✓) **all** that apply.

**Within 1-hr. of Jamestown Island (✓)**

LODGE, MOTEL, CABIN, RENTED CONDO/ HOME/  
TIME SHARE, B&B \_\_\_\_\_

CAMPGROUND/ TRAILER PARK \_\_\_\_\_

BACKCOUNTRY CAMPSITE \_\_\_\_\_

SEASONAL RESIDENCE \_\_\_\_\_

RESIDENCE OF FRIENDS OR RELATIVES \_\_\_\_\_

OTHER (Please specify: \_\_\_\_\_) \_\_\_\_\_

- d) During your stay in the area, how many times did you and your group enter Jamestown Island?

NUMBER OF TIMES YOU ENTERED JAMESTOWN ISLAND \_\_\_\_\_

11. Please list the order in which you and your group visited other places in the Jamestown Island area. Simply write 1, 2, 3, and so forth on the line beside each place you visited.

\_\_\_\_\_ DID NOT VISIT ANY OF THE FOLLOWING PLACES → **Go on to Question 12**

**Order visited (1, 2, 3...)**

\_\_\_\_\_ YORKTOWN (NATIONAL  
BATTLEFIELD/NATIONAL  
CEMETERY)

\_\_\_\_\_ YORKTOWN VICTORY  
CENTER

\_\_\_\_\_ JAMESTOWN SETTLEMENT

\_\_\_\_\_ WILLIAMSBURG POTTERY

\_\_\_\_\_ COLONIAL WILLIAMSBURG

\_\_\_\_\_ OUTLET MALL

\_\_\_\_\_ BUSCH GARDENS

\_\_\_\_\_ WATER COUNTRY USA

\_\_\_\_\_ VIRGINIA BEACH

\_\_\_\_\_ RICHMOND, VIRGINIA

\_\_\_\_\_ JAMESTOWN *EXPLORER*  
BOAT TOUR

\_\_\_\_\_ NORFOLK, VIRGINIA





17. For you and each of the adults (age 18 or over) in your personal group on this visit, please indicate the highest level of education received. Please check (✓) only **one** for each person.

	<b>Highest level of education</b>				
	Some High School	High School Graduate/GED	Some College	Bachelor's Degree	Graduate Degree
YOURSELF	_____	_____	_____	_____	_____
ADULT #2	_____	_____	_____	_____	_____
ADULT #3	_____	_____	_____	_____	_____
ADULT #4	_____	_____	_____	_____	_____
ADULT #5	_____	_____	_____	_____	_____
ADULT #6	_____	_____	_____	_____	_____
ADULT #7	_____	_____	_____	_____	_____

18. In what ethnicity and race would you place yourself?

\_\_\_\_\_ DO NOT WISH TO ANSWER → **Go on to Question 19**

Ethnicity:

\_\_\_\_\_ HISPANIC OR LATINO

\_\_\_\_\_ NOT HISPANIC OR LATINO

Race: Please check (✓) **one** or more.

\_\_\_\_\_ AMERICAN INDIAN OR ALASKA NATIVE

\_\_\_\_\_ ASIAN

\_\_\_\_\_ BLACK OR AFRICAN AMERICAN

\_\_\_\_\_ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

\_\_\_\_\_ WHITE



21. a) Please check (✓) the information services that you or your group **used** during this trip to Jamestown Island.
- b) Next, for only those services that you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services that you or your group used, please rate their **quality** from 1-5.

Use information service?	If used, how important?					If used, what quality?				
	Not important		Extremely important			Very poor		Very good		
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ JAMESTOWN BROCHURE/ MAP (National Park Service)										
_____ "WELCOME TO JAMESTOWN" BROCHURE (Association for the Preservation of Virginia Antiquities)										
_____ VISITOR ORIENTATION FILM										
_____ ARCHAEOLOGICAL EXCAVATION SITE INTERPRETATION (APVA guides/ docents)										
_____ DALE HOUSE ARCHAEOLOGY LAB INTERPRETATION (exhibit/ APVA guides/ docents)										
_____ LIVING HISTORY/ COSTUMED PRESENTATIONS (talks, tours)										
_____ PARK RANGER TOURS (other than living history programs)										
_____ GLASSHOUSE DEMONSTRATION										
_____ VISITOR CENTER INFORMATION DESK										
_____ VISITOR CENTER MUSEUM EXHIBITS										
_____ VISITOR CENTER MUSEUM STORE/ SALES ITEMS										
_____ ROADSIDE EXHIBITS										
_____ PINCH POT CHILDREN'S PROGRAM										
_____ JUNIOR RANGER PROGRAM										
_____ WALKING TOUR AUDIO TAPE										

22. a) Please check (✓) the services and facilities that you or your group **used** during this trip to Jamestown Island.
- b) Next, for only those services and facilities that you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services and facilities that you or your group used, please rate their **quality** from 1-5.

Use service/ facility?	If used, how important?					If used, what quality?				
	Not important		Extremely important			Very poor		Very good		
	1	2	3	4	5	1	2	3	4	5
_____ RESTROOMS				_____					_____	
_____ FOOD SERVICE				_____					_____	
_____ LOOP DRIVE				_____					_____	
_____ LOOP DRIVE SELF-GUIDED TOUR AUDIO TAPE				_____					_____	
_____ LOOP DRIVE ROADSIDE EXHIBITS				_____					_____	
_____ ACCESS FOR DISABLED PERSONS				_____					_____	

23. Jamestown Island occasionally offers special evening events, such as an historic walking tour explaining the 1676 Rebellion (1 to 1-1/2 hour program). On a future visit, would you and your group be interested in attending events such as this?

\_\_\_\_\_ YES, LIKELY      \_\_\_\_\_ NO, UNLIKELY      \_\_\_\_\_ NOT SURE

24. a) On a future visit, would you and your group be likely to use public transportation to tour Jamestown Island if it were provided?

\_\_\_\_\_ YES, LIKELY      \_\_\_\_\_ NO, UNLIKELY      \_\_\_\_\_ NOT SURE



→ **Go on to Question 25**



b) If YES, what type of public transportation would you and your group prefer? Please check (✓) **all** that apply.

\_\_\_\_\_ SHUTTLE BUS AROUND JAMESTOWN ISLAND WITH INTERPRETIVE GUIDE

\_\_\_\_\_ SHUTTLE BUS AROUND JAMESTOWN ISLAND WITHOUT INTERPRETIVE GUIDE

\_\_\_\_\_ BOAT TOUR AROUND JAMESTOWN ISLAND WITH INTERPRETATION

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

**Please go on to the next page ➡**

c) Would you and your group be willing to park your vehicle and **pay a modest fee** to ride public transportation to visit major park attractions on a future trip?

\_\_\_\_\_ YES, LIKELY      \_\_\_\_\_ NO, UNLIKELY      \_\_\_\_\_ NOT SURE

d) Would you and your group be willing to **pay a modest fee** to ride public transportation between Jamestown Island and Jamestown Settlement on a future trip?

\_\_\_\_\_ YES, LIKELY      \_\_\_\_\_ NO, UNLIKELY      \_\_\_\_\_ NOT SURE

25. Jamestown Island currently charges a \$6/ person entrance fee to visit the park. In your opinion, how appropriate is the amount of the entrance fee? Please circle one answer.

ENTRANCE FEE:      TOO HIGH      ABOUT RIGHT      TOO LOW

26. a) During this trip, how much money did you and your group spend on Jamestown Island?

b) During this trip, how much money (for the items listed below) did you and your group spend in the **area** of Jamestown Island/ Colonial Williamsburg/ Yorktown (outside Jamestown Island, but within a 1-hour drive)?

Local residents: only include expenditures that were **directly related** to this visit to the park.

**Money spent within 1-hour drive of Jamestown Island**

Please write "0" if you and your group did not spend any money.

	<b>On Jamestown Island</b>	<b>Area within 1 hr. drive</b>
HOTELS, MOTELS, CABINS, B&B		\$ _____
CAMPING FEES AND CHARGES		\$ _____
RESTAURANTS AND BARS		\$ _____
GROCERIES AND TAKE OUT FOOD		\$ _____
GAS AND OIL (auto, RV, boat)		\$ _____
OTHER TRANSPORTATION EXPENSES (local bus, van tours, air tours, ferry, <b>but not</b> airfare to and from home)	\$ _____	\$ _____
ADMISSIONS, RECREATION, ENTERTAINMENT FEES	\$ _____	\$ _____
ALL OTHER PURCHASES (souvenirs, film, books, sporting goods, clothing)	\$ _____	\$ _____

c) How many people do the above expenses cover?

ADULTS (18 years or over) \_\_\_\_\_ CHILDREN (under 18 years) \_\_\_\_\_

27. If you were a manager planning for the next 5 years at Jamestown Island, what would you propose? Please include any services not currently provided that you would like to have available. Please be specific.

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28. Is there anything else you and your group would like to tell us about your visit to Jamestown Island?

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29. Overall, how would you rate the quality of the visitor services provided to you and your group at Jamestown Island during this trip? Please circle only **one**.

VERY GOOD      GOOD      AVERAGE      POOR      VERY POOR

Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox.

**OFFICIAL BUSINESS**

**Visitor Services Project  
Cooperative Park Studies Unit  
College of Natural Resources  
P.O. Box 441133  
University of Idaho  
Moscow, Idaho 83844-1133**