

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

Visitor Services Project

Jefferson National Expansion Memorial

Visitor Study



OMB Approval 1024-0224 Expiration date: 2012



United States Department of the Interior

NATIONAL PARK SERVICE
Jefferson National Expansion Memorial
11 North 4th Street
St. Louis. Missouri 63102



IN REPLY REFER TO:

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 Jefferson National Expansion 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.

Thank you in advance for providing important feedback regarding your visit.

Sincerely,

Thomas A. Bradley Superintendent

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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 (O), please mark your answer by filling in the circle with **black or blue ink**. Please do not use pencil.

Like this: Not like this: V X O

- 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 at Jefferson National Expansion 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 Jefferson National Expansion 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)					personal gro of National		are that Jefferson National System?
		Ο	Yes	C) 1	No		
	b)	Expar in wes	nsion Mem	orial wa ansion,	is esta	ablished to	mėmor	are that Jefferson National ialize Thomas Jefferson's part red the west, Dred Scott, and
		Ο	Yes	C)	No		
2.	a)		every mem n 30 miles			ersonal gro	ıp a re	sident of the St. Louis area
		0	No	C) ,	Yes → Go t	o Que	stion 3
	b)	the no	-	membe	rs in y	•		norial the primary reason that p came to the St. Louis area
		0	Yes	C) 1	No		
	c)	transp	ortation us	sed to tr	avel r	s in your per most of the ark)? Pleas	distand	group, what was the method of ce from home to the St. Louis (●) one.
O		Car		Ο	Moto	rcycle	Ο	SUV/truck/van
O		Motor	home	0	Airpla	ine	Ο	Other (Specify)
3.	Wł	nat was	s your pers	sonal gr	oup's	primary des	stinatio	n on this trip?
	Ο	Je		tional E - OR -	xpans	sion Memor	ial	
	O	Lo	cation					
						(Place, ci	•	•
4.	,			-				ersonal group spend visiting the list partial hours as ¼, ½, ¾.
			_ Number	of hours	8			
	b)		s visit, did orial on mo	•		•	t Jeffer	son National Expansion
		Ο	Yes	C)	No → Go t o	Ques	tion 5

	c) If Y	ES, how many da	ys did	you visit th	e park?		Number of days		
5.		is visit, which were nal Expansion Mei					ıp visited Jefferson apply.		
	0	Visit a National F	ark Se	ervice site		0	Learn history		
	0	Show park to frie	nds/re	latives		Ο	Saw sign on highway		
	0	Obtain stamp in	Nation	al Park Ser	vice pas	sport			
	0	Travel to the top	of the	Gateway A	rch				
	0	Visit African Ame	erican I	nistory site					
	0	Other (Please sp	ecify)						
6.	When Expar	did your personal nsion Memorial? P	l group lease	make the mark (●) o	decision ne .	to visi	t Jefferson National		
	0	On the day of the	e visit						
	0	The day before the	he visi	t					
	0	3 days to a week	before	e the visit					
	0	More than a wee	k to a	month befo	re the vi	sit			
	0	More than a mor	ith to 6	months be	fore the	visit			
	0	More than 6 mor	ıths, bı	ut less than	a year b	efore	the visit		
	0	A year or more b	efore t	he visit					
7.	a) On this visit, how many vehicles did your personal group use to arrive at the Memorial parking? Number of vehicles								
	0	– OR – Walked/bicycle	ed/use	d public tra	nsportat	ion			
	0	Parked somew	vhere 6	else					
		ou parked at the Nation convenient?	/lemori	al parking,	did your	perso	nal group find the parking		
	0	Yes	Ο	No					

	, .	ur personal groung there?	ıp park	ed at the Memorial parking, did you feel safe
	Ο	Yes	Ο	No
8.	,	• • •		en unable to visit Jefferson National Expansion d you have visited at another time?
	Ο	No, unlikely	0	Yes, likely → Go to Question 9
), what would yo (●) one .	ou have	e done with the time you spent on this trip? Please
	Ο	Gone somew	here el	se → Distance from home
				- OR -
				Location(Place, city, & state)
	0	Vacationed at	t home	
	Ο	Gone to work	at my	regular job
	Ο	Not sure/none	e of the	ese
9.	•		-	your personal group stay overnight, away from their t. Louis or in the area within 30 miles of the park?
	Ο	Yes	Ο	No → Go to Question 10
				rere spent in each of the following types of lodging within 30 miles of the park)?
		Lodge, hote	el, mot	el, vacation rental, B&B, etc.
		RV/trailer o	ampin	g
		Tent campi	ing in c	developed campground
		Seasonal r	esiden	ce
		Residence	of frier	nds or relatives
		Other (Plea	ase sne	ecify)

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- 10. a) On this visit, in which activities did your personal group participate within Jefferson National Expansion Memorial? 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
0	0	Attending ranger-led talks/programs/tours
0	0	Bicycle rentals
0	Ο	Helicopter ride
Ο	Ο	Old Cathedral on Gateway Arch grounds
0	Ο	Participating in Junior Ranger program
0	Ο	Picnicking
Ο	Ο	Recreational activities on Gateway Arch grounds (jogging, bicycling, etc.)
0	Ο	Riverboat cruise
Ο	Ο	Shopping in park bookstore (at Gateway Arch or Old Courthouse)
0	Ο	Tram ride to the top of the Arch
0	Ο	Viewing films
0	Ο	Visiting the Museum of Westward Expansion at the Arch
0	Ο	Visiting the Old Courthouse
0	Ο	Walking the park grounds
0	n/a	Other – this visit (Please specify below)
n/a	Ο	Other – future visit (Please specify below)

- 11. a) On this visit, which locations did your personal group visit within St. Louis? Please mark (●) all that apply in column (a).
 - b) If you were to visit St. Louis in the future, in which locations would your personal group plan to visit? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Location
Ο	Ο	City Garden
0	Ο	City Museum
Ο	0	Forest Park (includes Art Museum, History Museum, Science Center, and St. Louis Zoo)
Ο	Ο	Grant's Farm
	Ο	Jefferson National Expansion Memorial
Ο	Ο	Missouri Botanical Garden
Ο	Ο	St. Louis Cardinals game
Ο	Ο	Ulysses S. Grant National Historic Site
Ο	Ο	Other – this visit (Please specify below)
Ο	Ο	Other – future visit (Please specify below)
12. a) On thi	s visit, did your pe	ersonal group visit the Old Courthouse?
0	Yes C	No → Go to part c
	s, why did your pe e mark (●) all tha	ersonal group choose to visit the Old Courthouse? t apply.
Ο	Historic Architec	ture O History of Dred Scott
Ο	Other (Please sp	pecify)
c) If NO,	why not? Please	mark (●) one.
Ο	Not interested	
0	Building appeare	ed closed
Ο	Did not know abo	out the Old Courthouse
0	Other (Please sp	pecify)

13.		a) On this visit, did your personal group visit any part of the Gateway Arch (grounds, museum, or tram to the top)?						
	Ο	Yes	Ο	No → Go	to Questio	n 14		
	,	ou visited both Olup visit first?	d Cour	thouse and	Gateway A	rch, where did	your persona	
	Ο	Visited Old Co	urthou	ise first	O Vis	ited Gateway	Arch first	
14. Currently, several concession fees are charged at Jefferson National Expandemorial for different services including parking, tram ride in the arch and rin the museum. (Some fees include the \$3 park entrance fee and thus are discounted for pass holders and combined tickets.) On this visit, please rate fees paid for each of the concession services below.							ch and movies nus are	
_	Servi	ce		Did not use	Too low	About right	Too high	
		ram (\$10/adult d \$2.50/child)		Ο	0	Ο	Ο	
		and Clark movie 4/adult and \$2.50/	child)	0	0	Ο	Ο	
		ment to the Drear ovie (\$4/adult)	n	0	0	Ο	Ο	
	Parkir	ng fee		0	0	0	Ο	
15. If you were to visit Jefferson National Expan activities/programs would your personal grouparticipating? Please mark (●) all that apply					roup be inte			
	Ο	Not interested in	park a	ctivities/pro	grams → G	o to Question	າ 16	
	Ο	Indoor exhibits			Ο	Music prog	grams	
	Ο	Outdoor exhibits			Ο	Ranger-le	Ranger-led tours	
	Ο	Temporary exhib	its tha	t change	Ο	Self-guide	d tours	
	Ο	Children's progra	ams					
	0	Audiovisual prog	rams (movies, vid	eo, or audic)		
	0	Electronic media podcasts, inter			,		digital files,	
	Ο	Living history de	monstr	ations/cost	umed interp	retive program	IS	
	Ο	Printed materials	(broc	hures, book	s, maps, etc	c.)		
	Ο	Other (Please sp	ecify)					

16.	whic	u were to visit Jefferson National Exp. h outdoor activities/programs would cipating? Please mark (●) all that app	your pe	Memo ersona	orial in the future, in all group be interested in		
	Ο	Not interested in park activities/prog	grams •	→ Go	to Question 17		
	Ο	Bicycling		Ο	Picnicking		
	Ο	Bird watching		Ο	Self-guided tours		
	Ο	Children's educational play area		Ο	Stargazing		
	Ο	Children's programs		Ο	Train watching		
	Ο	Jogging		Ο	Walking tours		
	Ο	Living history demonstrations/costu	med in	terpret	ive programs		
	Ο	Other (Please specify)					
17.	,	e park were expanded to the Illinois s ccess, would your personal group vis			•		
	0	Yes, likely O No, ui	nlikely Quest i	ion 18	O Not sure		
	b) If Y	ES, how would you prefer to travel to	the ne	w site'	? Please mark (●) one .		
	0	Bicycle		Ο	Walk		
	0	Public transportation		0	Tour bus		
	0	Private vehicle (car, motorcycle, e	tc.)	Ο	Rental vehicle		
	Ο	Other (Please specify)					
18.	. If you were to visit Jefferson National Expansion Memorial in the future, in whice types of activities/programs along the riverfront would your personal group be interested in participating? Please mark (●) all that apply.						
	0	Not interested in park activities/progr	rams 🗗	Go t	o Question 19		
	0	Bicycle rentals	0	River	boat cruise		
	0	Dining	0	Smal	I musical concerts		
	0	Interpretive programs	0	Watc	hing the river		
	0	Other (Please specify)					

- 19. For your personal group, please estimate expenditures for the items listed below for this visit to Jefferson National Expansion Memorial and the surrounding area (within 30 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 Jefferson National Expansion Memorial.
 - b) Please list your personal group's total expenditures in the **surrounding area** outside the park (within 30 miles of the park).

NOTE: Surrounding area residents should only include expenditures that were just for this visit to Jefferson National Expansion Memorial.

	a) In	EXPEND side park		S side park
Spent no money (●)	0	→ Go to (b)	Ο	→ Go to (c
Lodge, hotel, motel, cabin, B&B, etc.		n/a	\$	
Camping fees and charges		n/a	\$	
Guide fees and charges	\$_		\$	
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, taxis, auto repairs, but NOT airfare)	\$		\$	
Admission, recreation, entertainment fees	\$		\$	
All other purchases (souvenirs, books, postcards, sporting goods, clothing, dona		etc.)	\$	
c) How many people do the above exper children were covered by the expendit		s cover? Pleas	e write	"0" if no
Adults (18 years or over)		Children (ι	ınder 1	8 years)

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20. a) For the safety issues below, please indicate how safe your personal group felt from crime and accidents during this visit to Jefferson National Expansion Memorial. Please mark (●) **one** answer for each issue.

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How safe did you feel in the pa

Safe	ety iss	ue	Very unsafe	Unsafe	Neither safe nor unsafe	Safe	Very safe	
Per	sonal	safety—from crime	0	Ο	Ο	Ο	Ο	
Per	sonal	safety—from accidents	0	Ο	Ο	Ο	0	
Per	sonal	property—from crime	0	Ο	Ο	Ο	0	
b) If you marked that you felt "very unsafe" or "unsafe" for any issues, please explain why.							above	
21.		is visit, was your persona os? Please mark (●) one			following typ	pes of o	rganized	
	a) Co	mmercial guided tour gro	oup	0	Yes	Ο	No	
	b) Sc	hool/educational group		0	Yes	Ο	No	
	c) Otl	ner (scouts, work, church	, etc.)	0	Yes	Ο	No	
		rou were with an organize re in this group?	ed group,	how man	y people, in	cluding	yourself,	
		Number of people	in organiz	zed group				
22.	22. a) On this visit, which type of personal group (not guided tour/school/other organized group) were you with? Please mark (●) one .							
	0	Alone		0	Friends			
	Ο	Family		0	Family an	d friend	S	
	Ο	Other (Please specif	y)					
	,	this visit, how many peourself?	ple were	in your pe	ersonal grou	p, inclu	ding	
		Number of people	in person	al group				

	•						
23. a) For you	ou only, which e mark (●) o r		y best rep	resents yo	ur annua	l househ	old income?
O Less	than \$24,999	0	\$50,000-	\$74,999	Ο	\$150,00	00-\$199,999
O \$25,	000-\$34,999	0	\$75,000-	\$99,999	Ο	\$200,00	00 or more
O \$35,	000-\$49,999	Ο	\$100,000)-\$149,999	Ο	Do not	wish to answe
b) How m	any people a	ire in you	r househo	ld?	Number	of people	Э
c) How m unpaid	uch income of time off from	did your h work)? I	nousehold Mark (●) "I	forgo to m None" or s	nake this t pecify the	trip (due t e amount	o taking forgone.
Ο	None - or - A	Amount fo	orgone \$				
•	personal gro answer, ple	•		ase provid	le the follo	owing. If y	ou do not
	a) Current age	or n	U.S. ZIP c name of co ther than L	untry	Jeff Expa		tional morial
Yourself							
Member #2							
Member #3							
Member #4							
Member #5							
Member #6							
Member #7							
25. a) Are me	embers of you h group mem		al group H	lispanic or	Latino? I	Please m	ark (●) one
	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
Yes, Hispanio Latino	o or	0	Ο	0	0	0	0
No, not Hispa or Latino	anic O	0	0	0	Ο	0	O

b) What is the race of each member of your personal group? Please mark (●) **one or more** for each group member.

			Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7			
American Indian or Alaska Native			Ο	Ο	Ο	Ο	Ο	Ο	Ο			
Asian			0	0	0	0	0	Ο	0			
Black or African American			Ο	0	0	Ο	0	0	0			
Native Hawaiian or other Pacific Islander			Ο	Ο	Ο	Ο	Ο	Ο	Ο			
White			Ο	0	Ο	0	Ο	Ο	0			
26.		e(s) do m			son Expans ur personal				ch			
a) S	Speaking	Ο	English	0 (Other (Spe	cify)						
b) Reading O		English	0 (Other (Spe	cify)							
			he park ne ervice or m		orovided in None."	language	es other t	han Engli	sh?			
Ο	Servi	ce (Speci	fy)				- OR -	O N	one			
27. a) Did anyone in your personal group have difficulty accessing or participating in park activities or services due to a disability or physical challenge?												
	Ο	Yes		Ο	No → G o	on to Q	uestion 2	28				
	b) If YES	S, what pa	ark service	es or activ	ities were	difficult to	access/p	participate	e in?			
	•	c) Which specific problems did the person(s) have? Please mark (●) all that apply.										
	0	Hearing (difficulty hearing ranger programs, films, audio-visual exhibits or programs, or information desk staff)							its or			
	O Visual (difficulty seeing exhibits, directional signs, or visual aids that are part of programs)						are					
	Ο	O Mobility (difficulty accessing facilities, services, or programs)										
	Ο	Other (F	Please spe	cify)								

28.	a) What did you Expansion M		p like most abou	ut your visit to	Jefferson National	_
	b) What did you Expansion M		p like least abou	ut your visit to	Jefferson National	_
29.			s you may have al Expansion Me		ur personal group's	-
30.	Is there anything Jefferson Nation			ld like to tell us	s about your visit to	
31.	Overall, how wo	ould you rate the	e quality of the fa	acilities, servic	es, and recreationa	- -
	tional Expansion					
	Very poor	Poor	Average	Good	Very good	
	O	O	O	O	O	

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

Printed on recycled paper

OFFICIAL BUSINESS

Visitor Services Project
Park Studies Unit
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University of Idaho
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