

OFFICIAL BUSINESS

**Visitor Services Project
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
Moscow, Idaho 83844-1139**



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

Visitor Services Project

Fire Island National Seashore Visitor Study





United States Department of the Interior

NATIONAL PARK SERVICE
 Fire Island National Seashore
 120 Laurel Street
 Patchogue, NY 11772

IN REPLY REFER TO:

July 2008

Dear Visitor:

Thank you for participating in this important study. We want to learn about the expectations, opinions, and interests of people who come to Fire Island National Seashore. This information will help us improve our management of this site and better serve you, our visitor, on future visits.

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

When your visit is over, please complete the questionnaire. Seal it with the stickers provided on the last page and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, NPS VSP Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

Sean McGuinness
 Acting Superintendent

21. a) Are you or members of your group Hispanic or Latino? Please mark (●) **one** for each group member.

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
Yes, Hispanic or Latino	☐	☐	☐	☐	☐	☐	☐
No, not Hispanic nor Latino	☐	☐	☐	☐	☐	☐	☐

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

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
American Indian or Alaska Native	☐	☐	☐	☐	☐	☐	☐
Asian	☐	☐	☐	☐	☐	☐	☐
Black or African American	☐	☐	☐	☐	☐	☐	☐
Native Hawaiian or other Pacific Islander	☐	☐	☐	☐	☐	☐	☐
White	☐	☐	☐	☐	☐	☐	☐

22. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services?

☐ Yes ☐ No → **Go to Question 23**

b) If YES, what services or activities were difficult to access/participate in?

23. Is there anything else you and your personal group would like to tell us about your trip to Fire Island NS?

24. Overall, how would you and your personal group rate the quality of facilities, services, and recreational opportunities at Fire Island NS during this trip? Please mark (●) **one**.

Very poor	Poor	Average	Good	Very good
☐	☐	☐	☐	☐

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

♻️ Printed on recycled paper

16. On this trip were you and your personal group with the following groups?

- a) Commercial guided tour group ☐ Yes ☐ No
- b) School/educational group ☐ Yes ☐ No
- c) Other organized group (such as business group, scout group, etc.) ☐ Yes ☐ No

17. On this trip, what kind of personal group (not guided tour/school group/other organized group) were you with? Please mark (●) **one**.

- ☐ Alone ☐ Friends
- ☐ Family ☐ Family and friends
- ☐ Other (Please specify) _____

18. On this trip to Fire Island NS, how many people were in your personal group, including yourself?

_____ Number of people

19. For you and your personal group, please complete the answers below. If you do not have information for any group member, please leave that line blank.

	Current age	U.S. ZIP Code or name of country other than U.S.	Number of visits to Fire Island NS (including this visit) past 12 months
Yourself	_____	_____	_____
Member #2	_____	_____	_____
Member #3	_____	_____	_____
Member #4	_____	_____	_____
Member #5	_____	_____	_____
Member #6	_____	_____	_____
Member #7	_____	_____	_____

20. When using an area such as Fire Island NS, which **one** language do you and most members of your personal group prefer to use for the following?

- a) Speaking ☐ English ☐ Other (Specify) _____
- b) Reading ☐ English ☐ Other (Specify) _____

c) In your opinion, what **services** in the park need to be provided in languages other than English? Please specify a **service(s)** or mark (●) "None."

Service _____ ☐ None

DIRECTIONS

It may be helpful to know that within the boundaries of Fire Island National Seashore, you can visit not only National Park Service facilities like the Fire Island Lighthouse, Sailors Haven, Watch Hill and the Otis Pike Fire Island High Dune Wilderness, but also 17 private communities and Smith Point County Park on Fire Island, and the William Floyd Estate. Robert Moses State Park borders the National Seashore to its west.

At the end of your visit:

- 1) Please have the selected individual 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, or a pencil with dark (e.g. #2) lead.

Like this: ● Not like this: ✓ ✗ ⚪

- 4) Seal it with the stickers provided.
- 5) Drop it in a U.S. mailbox.

Thank you!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:

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 personal group on the questionnaire. 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 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

Please go to the next page →

Your Trip To Fire Island National Seashore

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

1. a) Prior to this trip, how did you and your personal group obtain information about Fire Island National Seashore (NS)? Please mark (●) **all** that apply.

- ☐ Obtained no information prior to trip → **Go to Question 2**
- ☐ Previous visits
- ☐ Friends/relatives/word of mouth
- ☐ Travel guides/tour books (such as AAA, etc.)
- ☐ Maps/brochures
- ☐ Park website: www.nps.gov/fiis
- ☐ Other websites
- ☐ Newspaper/magazine articles
- ☐ Telephone/written/email inquiry to park
- ☐ School class/program
- ☐ Long Island Convention and Visitors Bureau/Chambers of Commerce
- ☐ Park partners, such as Fire Island Lighthouse Preservation Society, Friends of Fire island NS, or other (Please specify) _____
- ☐ Local businesses (hotels, motels, restaurants, ferry, etc.)
- ☐ Special interest group (Please specify) _____
- ☐ Television/radio programs/videos
- ☐ Other (Please specify) _____

- b) From the sources marked above, did you and your personal group receive the type of information about the park that you needed? Please mark (●) one.

- ☐ No ☐ Yes → **Go to Question 2**

15. a) Whether or not you used them on this trip, please rate the importance from 1-5, of Fire Island NS services and facilities to you and your personal group.
- b) Please mark (●) **all** of the services/facilities that you and your personal group used during **this** trip to Fire Island NS.
- c) Finally, for only those services/facilities that you and your personal group used during **this** trip, please rate their quality from 1-5.

a) How important?

- 1=Not important
2=Somewhat important
3=Moderately important
4=Very important
5=Extremely important

b) Services and facilities used during this trip

Mark (●)

c) If used, what quality?

- 1=Very poor
2=Poor
3=Average
4=Good
5=Very good

At Barrett Beach/Talisman

- | | | |
|----------------------------------|-----------------------|-------|
| _____ Assistance from park staff | ☐ | _____ |
| _____ Bathhouse/restrooms | ☐ | _____ |
| _____ Dock | ☐ | _____ |
| _____ Food service | ☐ | _____ |
| _____ Picnic area | ☐ | _____ |
| _____ Trails | ☐ | _____ |

At Fire Island Wilderness Area

- | | | |
|--|-----------------------|-------|
| _____ Ranger-led tours/programs | ☐ | _____ |
| _____ Restrooms | ☐ | _____ |
| _____ Trails | ☐ | _____ |
| _____ Visitor center exhibits/observation room | ☐ | _____ |
| _____ Wilderness camping | ☐ | _____ |

At William Floyd Estate

- | | | |
|---------------------------------|-----------------------|-------|
| _____ Directional signs | ☐ | _____ |
| _____ Exhibits | ☐ | _____ |
| _____ Grounds/trails | ☐ | _____ |
| _____ Ranger-led tours/programs | ☐ | _____ |
| _____ Restrooms | ☐ | _____ |

14. a) Whether or not you used them on this trip, please rate the importance from 1-5, of Fire Island NS services and facilities to you and your personal group.
- b) Please mark (●) **all** of the services/facilities that you and your personal group used during **this** trip to Fire Island NS.
- c) Finally, for only those services/facilities that you and your personal group used during **this** trip, please rate their quality from 1-5.

a) How important?

1=Not important
 2=Somewhat important
 3=Moderately important
 4=Very important
 5=Extremely important

b) Services and facilities used during this trip

Mark (●)

c) If used, what quality?

1=Very poor
 2=Poor
 3=Average
 4=Good
 5=Very good

At Sailors Haven

_____ Bathhouse/restrooms	☐	_____
_____ Boardwalk	☐	_____
_____ Food service	☐	_____
_____ Marina	☐	_____
_____ Picnic area	☐	_____
_____ Ranger-led tours/programs	☐	_____
_____ Sunken Forest Trail	☐	_____
_____ Visitor center exhibits	☐	_____

At Watch Hill

_____ Bar	☐	_____
_____ Bathhouse/restrooms	☐	_____
_____ Campground	☐	_____
_____ Food service	☐	_____
_____ Marina	☐	_____
_____ Picnic area	☐	_____
_____ Ranger-led programs/canoe trip	☐	_____
_____ Salt Marsh Trail	☐	_____
_____ Visitor center exhibits	☐	_____

- c) If NO, what type of park information did you and your personal group need that was not available? Please be specific.
- _____

2. a) Prior to this trip to Fire Island, were you and your personal group aware that Fire Island NS is a unit of the National Park System? Please mark (●) **one**.

☐ Yes ☐ No

- b) Prior to this trip to Fire Island, were you and your personal group aware of the difference between Fire Island NS and other public beaches on the island, such as Smith Point County Park and Robert Moses State Park? Please mark (●) **one**.

☐ Yes ☐ No

3. On this trip, what was your primary reason for visiting the Fire Island NS **area** (within 45 miles of any entry point to Fire Island National Seashore)? Please mark (●) **only one**.

- ☐ Year round resident of Fire Island
- ☐ Resident of local area (within 45 miles)
- ☐ Seasonal resident of Fire Island and resident of local area (within 45 miles)
- ☐ Seasonal resident of Fire Island and **not** a resident of local area (within 45 miles)
- ☐ Visit Fire Island National Seashore
- ☐ Visit other attractions in the local area (within 45 miles)
- ☐ Visit friends/relatives in the local area (within 45 miles)
- ☐ Business
- ☐ Other (Please specify) _____

4. a) Where did you spend the night before you arrived at Fire Island NS? If you stayed at home, please write the name of your hometown and state.

Nearest city/town _____ State _____

- b) Where did you spend the night after your departure from Fire Island NS? If you stayed at home, please write the name of your hometown and state.

Nearest city/town _____ State _____

5. Including this visit, during which months of the last 12 months did you visit Fire Island NS? Please mark (●) **all** that apply.

- | | | |
|------------------------------------|--------------------------------------|-------------------------------------|
| ☐ July 2008 | ☐ June 2008 | ☐ May 2008 |
| ☐ April 2008 | ☐ March 2008 | ☐ February 2008 |
| ☐ January 2008 | ☐ December 2007 | ☐ November 2007 |
| ☐ October 2007 | ☐ September 2007 | ☐ August 2007 |

6. a) On this trip, did you and your personal group stay overnight, **away from your permanent residence**, on Fire Island or in the **area** (off the island, but within 45 miles of any entry point to Fire Island)?

- ☐ Yes ☐ No → **Go to Question 7**



- b) Please list the number of nights you and your personal group stayed on Fire Island or in the **area** (off the island, but within 45 miles of any entry point to Fire Island).

_____ Number of nights on Fire Island (including island communities)

_____ Number of nights in Fire Island NS **area** (off island, but within 45 miles)

- c & d) In what type of lodging did you and your personal group spend the night(s)? Please mark (●) **all** that apply.

- | <u>c) On Fire Island</u> | <u>d) Off Fire Island (but within 45 miles)</u> |
|--|---|
| ☐ Lodge/motel/hotel/cabin/B&B, etc. | ☐ |
| ☐ Campground/trailer park | ☐ |
| ☐ Backcountry camping | ☐ |
| ☐ On a boat | ☐ |
| ☐ Private residence (rented) | ☐ |
| ☐ Private residence (personally owned) | ☐ |
| ☐ Residence of friends or relatives | ☐ |
| ☐ Other (Please specify) | ☐ |

On Fire Island _____ Off Fire Island _____

13. a) Whether or not you used them on this trip, please rate the importance from 1-5, of the Fire Island NS services and facilities to you and your personal group.
- b) Please mark (●) **all** of the services/facilities that you and your personal group used during **this** trip to Fire Island NS.
- c) Finally, for only those services/facilities that you and your personal group used during **this** trip, please rate their quality from 1-5.

a) How important ?

- 1=Not important
2=Somewhat important
3=Moderately important
4=Very important
5=Extremely important

b) Services and facilities used during this visit

c) If used, what quality?

- 1=Very poor
2=Poor
3=Average
4=Good
5=Very good

Mark (●)

- | | | |
|---|-----------------------|-------|
| _____ Ferry service from Patchogue | ☐ | _____ |
| _____ Ferry service from Bay Shore | ☐ | _____ |
| _____ Ferry service from Sayville | ☐ | _____ |
| _____ Park brochure/map | ☐ | _____ |
| _____ Park website: www.nps.gov/fiis used before or during trip | ☐ | _____ |

At Fire Island Lighthouse

- | | | |
|--|-----------------------|-------|
| _____ Access for disabled persons | ☐ | _____ |
| _____ Assistance from park staff | ☐ | _____ |
| _____ Boardwalk/trails | ☐ | _____ |
| _____ Bookstore sales items (selection, price, etc.) | ☐ | _____ |
| _____ Directional signs | ☐ | _____ |
| _____ Educational programs | ☐ | _____ |
| _____ Parking | ☐ | _____ |
| _____ Restrooms | ☐ | _____ |
| _____ Special events/programs | ☐ | _____ |
| _____ Tower tour | ☐ | _____ |
| _____ Visitor center exhibits | ☐ | _____ |

12. a) On **past** trips, in which activities did you and your personal group participate while at Fire Island NS? Please mark (●) **all** that apply in column (a).

b) On **this** trip, in which activities did you and your personal group participate while visiting Fire Island NS? Please mark (●) **all** that apply in column (b).

a) Past trips**b) This trip**

- | | | |
|-----------------------|---|-----------------------|
| ☐ | Have not visited previously → Go part b of this question | n/a |
| ☐ | Attending ranger-led tours/programs | ☐ |
| ☐ | Boating | ☐ |
| ☐ | Camping | ☐ |
| ☐ | Dining/shopping at concession facilities | ☐ |
| ☐ | Beach activities
(beachcombing, swimming, sunbathing, etc.) | ☐ |
| ☐ | Experiencing solitude | ☐ |
| ☐ | Fishing | ☐ |
| ☐ | Hunting | n/a |
| ☐ | Learning history | ☐ |
| ☐ | Nature study (birdwatching, wildlife viewing) | ☐ |
| ☐ | Painting/drawing/photography | ☐ |
| ☐ | Spending time with family/friends | ☐ |
| ☐ | Visiting Fire Island Lighthouse | ☐ |
| ☐ | Visiting William Floyd Estate | ☐ |
| ☐ | Other (Please specify) | ☐ |

Past trips _____ This trip _____

c) Which **ONE** activity in column (b) above was your primary reason for visiting Fire Island NS on **this** trip?

7. On this trip to Fire Island NS, please indicate how the following elements may have affected your park experience. Please mark (●) **one** for each element.

Element	Detracted from	No effect	Added to	Did not experience
Beach/shoreline changes	☐	☐	☐	☐
Close contact with deer or other wildlife	☐	☐	☐	☐
Closed park facilities	☐	☐	☐	☐
Clothing optional use of beach/nude sunbathing	☐	☐	☐	☐
Dogs on beach	☐	☐	☐	☐
Mosquitoes	☐	☐	☐	☐
Private developments on island	☐	☐	☐	☐
Public facilities on island	☐	☐	☐	☐
Ticks	☐	☐	☐	☐
Vehicles on beach	☐	☐	☐	☐

8. a) On this trip to Fire Island NS, what forms of transportation did you and your personal group use to travel to the park from your home? Please mark (●) **all** that apply.

- | | | | |
|-----------------------|------------------------------|-----------------------|---------------------|
| ☐ | Airplane | ☐ | Amtrak |
| ☐ | Long Island Railroad | ☐ | Air train |
| ☐ | Private auto/vehicle | ☐ | Rental auto/vehicle |
| ☐ | Minibus/shuttle van | ☐ | Suffolk County bus |
| ☐ | Coach/tour bus | ☐ | Taxi/limo |
| ☐ | Motorcycle | ☐ | Bicycle |
| ☐ | Private boat | ☐ | Public ferry |
| ☐ | Water taxi | ☐ | Walk |
| ☐ | Other (Please specify) _____ | | |

b) What was the last mode of transportation that you and your personal group used **before** entering the park? Please mark (●) **one**.

- ☐ Automobile/vehicle ☐ Bicycle ☐ Private boat
☐ Public ferry ☐ Walk ☐ Water taxi
☐ Other (Please specify) _____

9. a) During **this** trip to Fire Island NS, which of the following sites did you and your personal group visit? Please mark (●) **all** that apply in column (a).

b) For the sites you visited on **this** trip, please list the amount of time spent at each location in hours OR days. List partial hours/days as 1/4, 1/2, 3/4.

☐ Did not stop at any places in the park → **Go to Question 10**

a) Visited park location

b) Time spent

Hours spent or Days spent

If less than 24 hours If more than 24 hours

Mark (●)

- | | | |
|---|-------|----------|
| ☐ Patchogue/Park headquarters | _____ | n/a |
| ☐ Fire Island Lighthouse | _____ | OR _____ |
| ☐ Sailors Haven | _____ | OR _____ |
| ☐ Sunken Forest | _____ | OR _____ |
| ☐ Talisman/Barrett Beach | _____ | OR _____ |
| ☐ Watch Hill Marina | _____ | OR _____ |
| ☐ Watch Hill Campground | _____ | OR _____ |
| ☐ Beaches | _____ | OR _____ |
| ☐ Otis Pike Wilderness Area | _____ | OR _____ |
| ☐ William Floyd Estate | _____ | n/a |

Sites not operated by the National Park Service

- | | | |
|--|-------|----------|
| ☐ Captree State Park | _____ | OR _____ |
| ☐ Communities on Fire Island | _____ | OR _____ |
| ☐ Robert Moses State Park | _____ | OR _____ |
| ☐ Smith Point County Park | _____ | OR _____ |

10. Which Fire Island communities or housing areas did you and your personal group visit? Please mark (●) **all** that apply.

- ☐ None → **Go to Question 11**
- | | | |
|---|---|---------------------------------------|
| ☐ Atlantique | ☐ Blue Point Beach | ☐ Cherry Grove |
| ☐ Cornielle Estates | ☐ Davis Park | ☐ Dunewood |
| ☐ Fair Harbor | ☐ Fire Island Pines | ☐ Lonelyville |
| ☐ Fire Island Summer Club | ☐ Kismet | ☐ Ocean Beach |
| ☐ Oakleyville | ☐ Ocean Bay Park | ☐ Saltaire |
| ☐ Point O'Woods | ☐ Robbins Rest | ☐ Other (Specify) |
| ☐ Seaview | ☐ Water Island | _____ |

11. If you were to visit Fire Island NS in the future, which of the following services/facilities would you and your personal group be likely to use if they were available? Please mark (●) yes or no for each item.

Yes, likely	No, unlikely	Service/facility	Yes, likely	No, unlikely	Service/facility
☐	☐	Backcountry camping	☐	☐	Educational center allowing overnight stays
☐	☐	Beaches with lifeguards	☐	☐	Fishing access for off-road vehicles
☐	☐	Boat docking slip	☐	☐	Hot showers
☐	☐	Boat mooring	☐	☐	Island interpretive center
☐	☐	Canoe/kayak rental	☐	☐	Mainland visitor center
☐	☐	Canoe/kayak trail	☐	☐	Ranger-led programs
☐	☐	Clothing optional beach	☐	☐	Tent cabin camping
☐	☐	Other (Please specify) _____			