

Massachusetts Department of Conservation and Recreation
Resource Management Planning Program
Visitor Survey

Thank you for completing this user survey for the Massachusetts Department of Conservation and Recreation (DCR) Resource Management Planning program. Your responses will help inform the planning process for various properties in the DCR system. Your responses to these questions are optional and anonymous.

IN THE FOLLOWING QUESTIONS, PLEASE TELL US ABOUT YOUR VISIT TO A DCR PARK

1) **What DCR park did you visit?** *(Please select only one park by filling in the bubble)*

- Billerica State Forest
- Boxford State Forest
- Carlisle State Forest
- Great Brook Farm State Park
- Governor Thomas Dudley Park
- Harold Parker State Park
- Holyoke Heritage State Park
- Lowell-Dracut -Tyngsborough State Forest
- Lowell Heritage State Park
- Mount Holyoke Range State Park
- Mount Tom State Reservation
- New Charles River Basin (North Point Park, Paul Revere Park, Nashua Street Park)
- Skinner State Park
- Warren H. Manning State Forest
- Other (Please specify)

(PLEASE PROCEED TO THE NEXT PAGE TO CONTINUE THE SURVEY)

2) Below is a list of some activities available at DCR parks. Please indicate which of these activities you and/or a member of your group participated in:

- a) on your most recent visit, and
- b) during the past twelve months at this park.

Activity	Participated on your most recent visit to this park	Participated in the past twelve months at this park
Attending a Park Event (e.g Festival, Road Race)	<input type="radio"/>	<input type="radio"/>
Biking, on Pavement	<input type="radio"/>	<input type="radio"/>
Biking, on Trails	<input type="radio"/>	<input type="radio"/>
Boating, Motorized	<input type="radio"/>	<input type="radio"/>
Boating, Non-motorized	<input type="radio"/>	<input type="radio"/>
Camping	<input type="radio"/>	<input type="radio"/>
Court Sports (e.g Tennis, Basketball)	<input type="radio"/>	<input type="radio"/>
Dog Walking	<input type="radio"/>	<input type="radio"/>
Educational / Interpretive Programs	<input type="radio"/>	<input type="radio"/>
Field Sports (e.g. Baseball, Soccer)	<input type="radio"/>	<input type="radio"/>
Fishing	<input type="radio"/>	<input type="radio"/>
Gathering with Family and/or Friends	<input type="radio"/>	<input type="radio"/>
Geocaching / Letterboxing	<input type="radio"/>	<input type="radio"/>
Hiking	<input type="radio"/>	<input type="radio"/>
Horseback Riding	<input type="radio"/>	<input type="radio"/>
Hunting	<input type="radio"/>	<input type="radio"/>
Nature Study	<input type="radio"/>	<input type="radio"/>
Park Passport Program	<input type="radio"/>	<input type="radio"/>
Picnicking	<input type="radio"/>	<input type="radio"/>
Playground / Tot-lot Activities	<input type="radio"/>	<input type="radio"/>
Swimming	<input type="radio"/>	<input type="radio"/>
Universally Accessible Events	<input type="radio"/>	<input type="radio"/>
Visiting a Historic Site	<input type="radio"/>	<input type="radio"/>
Walking / Jogging / Running	<input type="radio"/>	<input type="radio"/>
Winter Activities (e.g. Cross-Country Skiing, Snowshoeing)	<input type="radio"/>	<input type="radio"/>
Other (Please specify _____)	<input type="radio"/>	<input type="radio"/>

3) **When was your most recent visit to this park?** (Please select the month and year by filling in the appropriate bubble)

Month?

<input type="radio"/> January	<input type="radio"/> July
<input type="radio"/> February	<input type="radio"/> August
<input type="radio"/> March	<input type="radio"/> September
<input type="radio"/> April	<input type="radio"/> October
<input type="radio"/> May	<input type="radio"/> November
<input type="radio"/> June	<input type="radio"/> December

Year?

<input type="radio"/> 2012
<input type="radio"/> 2011
<input type="radio"/> 2010
<input type="radio"/> 2009
<input type="radio"/> 2008
<input type="radio"/> Before 2008

4) **How often have you visited this park in your lifetime?**

- This was my first visit (Proceed to question #6)
- 2 to 5 visits
- 6 to 10 visits
- Over 10 visits

5) **Of all of the visits you have made to this park in the past twelve months, approximately how many occurred during each of the following seasons? (Write number of visits for each season below)**

_____ Visits during the SUMMER (June - August)

_____ Visits during the FALL (September - November)

_____ Visits during the WINTER (December - February)

_____ Visits during the SPRING (March - May)

6) **What form(s) of transportation did you use to get to this park during your most recent visit? (Please fill the bubble for all that apply)**

- Motor Vehicle
- Commercial Tour Bus
- Walking
- Public Transportation
- Bicycle
- Other (please specify) _____

7) What do you like most about this park? (Please write your response in the space below)

8) How do you think DCR could improve this park? (Please write your response in the space below)

9) Do you or anyone in your group have a physical or cognitive condition that made it difficult to access or participate in park activities or services?

Yes (Please proceed to question #10)

No (Please proceed to question #11)

10) If you answered Yes to #9, what services or activities were difficult to access or participate in? (Please write your response in the space below)

IN THE FOLLOWING QUESTIONS, PLEASE TELL US ABOUT YOURSELF AND THE MEMBERS OF YOUR GROUP PRESENT DURING YOUR VISIT TO THIS PARK.

- 11) Including yourself, how many people were in your group during your most recent visit to this park? (Please write the number of people below)

- 12) Please indicate the age range for you and the first five members of your group. *If you prefer not to answer, please proceed to question #13.*

	<u>0 to 18 Years</u>	<u>19 to 34 Years</u>	<u>35 to 64 Years</u>	<u>65 Years and Over</u>
Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 13) Please answer the following for you and the first five members of your group. *If you prefer not to answer, please proceed to question #14.*

	Of Hispanic / Latino Ethnicity? (Mark if yes)
Yourself	<input type="radio"/>
Member #2	<input type="radio"/>
Member #3	<input type="radio"/>
Member #4	<input type="radio"/>
Member #5	<input type="radio"/>
Member #6	<input type="radio"/>

- 14) Please indicate the primary language spoken, if other than English for you and the first five members of your group. *If your primary language is English or you prefer not to answer, please proceed to question #15.*

	Primary Language Spoken, <u>if other than English</u>
Yourself	
Member #2	
Member #3	
Member #4	
Member #5	
Member #6	

- 15) Please provide the racial category that best describes you and members of your group by checking the appropriate box. *If you prefer not to answer, please proceed to question #16.*

	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Some Other Race Alone	Person of Two or More Races
Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Member #6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 16) Are you: Male Female

- 17) What is the ZIP code where you currently live? (Write ZIP code below)

18) Which category best describes your annual household income (before taxes)?

- Less than \$24,999
- \$25,000 - \$74,999
- \$75,000 - \$149,999
- \$150,000 or over

19) Do you own a smart phone ? Yes No

20) How did you hear about the availability of this survey? (Please check one option)

- I was made aware of the survey at the park I visited
- I was made aware of the survey by a park friends group
- The survey link was emailed to me by DCR
- I found the survey on DCR's website with no prior knowledge of its existence
- I read about the survey in the newspaper
- Other (Please Specify) _____

Thank you for your help! Please mail this survey to:

Department of Conservation and Recreation
Office of Public Outreach
251 Causeway Street, 9th Floor
Boston, MA 02114

Or, you can scan a copy of your survey and send it by email to:

Dcr.updates@state.ma.us

In the subject line, please include the DCR property that you are filling the survey out for.