

## Lynchburg Museum System Visitor Survey

This information helps us make marketing and planning decisions for the Museum System and your personal information will not be shared with others.

1. Where are you visiting from?  City of Lynchburg  within 25 Miles of Lynchburg  
 other area of Virginia  other state or country (please specify) \_\_\_\_\_

2. How many people are in your party? \_\_\_\_\_  
(If you are with a group of 10 or more, please specify group name \_\_\_\_\_)

3. Why are you visiting Lynchburg?  
 business  visiting historical attractions  visiting/attending college  
 visiting family  special event (please name \_\_\_\_\_)  
other (please specify) \_\_\_\_\_

4. How did you learn about the Museum or Point of Honor?  
 website  Discovery Map  brochure  Visitor Center  road sign  
magazine \_\_\_\_\_  Lynchburg Guide  television / radio  
other (please specify) \_\_\_\_\_

5. What other attractions are you visiting while in Lynchburg? (please specify)  
\_\_\_\_\_

6. Are you staying overnight in Lynchburg? \_\_\_\_\_ (if so, where?) \_\_\_\_\_

7. What mode of transportation are you using?  
 car  bus  airplane  motorcycle  walking  
 bike  train  other \_\_\_\_\_

8. Age:  under 18  18-29  30-49  over 50

9. Gender:  female  male

10. Annual Household Income Level:  
 less than \$50,000  \$50,000 to \$100,000  over \$100,000

11. Race:  African American  Asian  Caucasian  Hispanic  
 Native American  other \_\_\_\_\_

Please share any comments you have about improvements we could make, exhibits you would like to see, or other ideas you may have. Feel free to use the back and thank you for taking the time to visit the Museum and give us your feedback!

### Optional:

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_