



MOVING SAND DUNES

Dear Guest,

We are pleased to welcome you in the **County of Lębork**.

In order to optimise our offer according to your wishes, we would like to know more about your opinions and yourself as our visitor.

We therefore kindly ask you to fill in this questionnaire after your visit.

This is an **anonymous survey** so that your answers cannot be traced back to you personally.

Thank you very much for your support!

A1 Are you visiting the moving sand dunes for the first time?						
01 <input type="checkbox"/> Yes		02 <input type="checkbox"/> No , I've already been here _____ times				
A2 How did you become aware of the moving sand dunes? (More than one answer possible!)						
01 <input type="checkbox"/> References on the Internet		06 <input type="checkbox"/> Information in travel guide/brochure		11 <input type="checkbox"/> By chance / passing by		
02 <input type="checkbox"/> Recommendation by relatives / friends		07 <input type="checkbox"/> Information at other attractions		12 <input type="checkbox"/> Recommendation by the landlord		
03 <input type="checkbox"/> Television show		08 <input type="checkbox"/> Flyer		13 <input type="checkbox"/> Report on radio		
04 <input type="checkbox"/> Advertisement in newspaper/magazine		09 <input type="checkbox"/> Report in newspaper/magazine		14 <input type="checkbox"/> Other (please specify):		
A3 How did you get to the moving sand dunes?						
01 <input type="checkbox"/> By public transport		03 <input type="checkbox"/> By car / caravan		05 <input type="checkbox"/> Walking		
02 <input type="checkbox"/> By excursion, booked tour (motor coach, bus)		04 <input type="checkbox"/> By bicycle		06 <input type="checkbox"/> Other (please specify!):		
A4 How satisfied are you with the following aspects at the moving sand dunes?						
Please rate the aspects on a scale from "very satisfied" to "not satisfied at all". Please make only one cross per aspect!						
		very satisfied	satisfied	neither... nor	not satisfied	not satisfied at all
01 Admission price		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02 Price performance ratio		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03 Options for transport to the attraction		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04 Service / assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05 Opening hours		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06 Child friendliness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07 Parking facilities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08 Content of attraction		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09 Information about the attraction		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Sanitary facilities (toilet, washbasin,...)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Cleanliness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Shopping facilities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Catering facilities (cafe, restaurant,...)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Overall impression of this attraction		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 General satisfaction with your visit		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A5 <i>How much time did you spend on your visit to the moving sand dunes (Please, only one answer!)</i>			
	01 <input type="checkbox"/> Less than 30 minutes	03 <input type="checkbox"/> One hour or more, but less than two hours	05 <input type="checkbox"/> More than half a day
	02 <input type="checkbox"/> 30 minutes or more, but less than one hour	04 <input type="checkbox"/> Two hours or more, but less than half a day	06 <input type="checkbox"/> The whole day
A6	<i>Did you visit other tourist attractions or events in the County of Łebsk:</i>		
	01 <input type="checkbox"/> Revitalised town walls in Łebsk	02 <input type="checkbox"/> Museum in Łebsk	03 <input type="checkbox"/> Saint James Sanctuary in Łebsk
	04 <input type="checkbox"/> Łeba Park - Dinosaurs in Łeba	05 <input type="checkbox"/> Historic palaces, manor houses, churches in the County of Łebsk	
	01 <input type="checkbox"/> the Saint James's Festival in Łebsk	02 <input type="checkbox"/> the International Enclave of Painters in Poraj	
	03 <input type="checkbox"/> the Windsurfing Championship in Łeba	04 <input type="checkbox"/> the World Championships in Offshore Angling in Łeba	
	05 <input type="checkbox"/> The Tomasz Hopfer Ecological Marathon	06 <input type="checkbox"/> Culinary Cod-fish Festival (Festiwal Pomuchla) in Łeba	
	Do you spend your time active? If yes, please mark which active forms of recreation in the County of Łebsk do you prefer:		
	01 <input type="checkbox"/> water sports	02 <input type="checkbox"/> bicycle riding	03 <input type="checkbox"/> horse riding
	04 <input type="checkbox"/> walking	05 <input type="checkbox"/> jogging	

B1 <i>For what reason are you here today? (Please, only one answer!)</i>			
	01 <input type="checkbox"/> I'm on a daytrip from my holiday / business destination at.....	02 <input type="checkbox"/> I'm on a daytrip from my home residence at	03 <input type="checkbox"/> I'm on a touring (excursion) → go to question no. B5
B2	<i>What is the main reason / motivation of your trip to the place of accommodation? (More than one answer possible!)</i>		
	01 <input type="checkbox"/> Holidays to relax	04 <input type="checkbox"/> Cultural holidays	07 <input type="checkbox"/> Natural holidays
	02 <input type="checkbox"/> City trip	05 <input type="checkbox"/> Wellness/health holidays	08 <input type="checkbox"/> Visiting friends or relatives
	03 <input type="checkbox"/> Shopping trip	06 <input type="checkbox"/> Activity holidays	09 <input type="checkbox"/> Business trip / meeting, conference
	10 <input type="checkbox"/> Other (please specify):		
B3	<i>In what kind of accommodation are you staying? (Please, only one answer!)</i>		
	01 <input type="checkbox"/> Hotel	04 <input type="checkbox"/> Private room	07 <input type="checkbox"/> Private, with friends or relatives
	02 <input type="checkbox"/> Guesthouse/B&B	05 <input type="checkbox"/> Holiday apartment	08 <input type="checkbox"/> Camping site / caravan
	03 <input type="checkbox"/> Youth hostel	06 <input type="checkbox"/> Holiday home	09 <input type="checkbox"/> Other (Please specify!):
B4	<i>How did you get to your holiday / business destination? (Please, only one answer!)</i>		
	01 <input type="checkbox"/> By plane	03 <input type="checkbox"/> By car, caravan	05 <input type="checkbox"/> By bicycle
	02 <input type="checkbox"/> By train/bus (public transport)	04 <input type="checkbox"/> By bus (excursion, touring)	06 <input type="checkbox"/> Other (Please specify!):
B5	<i>Are you travelling alone or are you accompanied by somebody?</i>		
	01 <input type="checkbox"/> I am travelling alone	02 <input type="checkbox"/> I am accompanied by	
		_____ adults (18 years and older including yourself)	_____ children (under 18 years)
		(please fill out the number)	(please fill out the number)
B6	<i>Please provide the following information for ONE PERSON ONLY!</i>		
	Your age: _____ years	Your gender: 01 <input type="checkbox"/> Male	02 <input type="checkbox"/> Female
	In which country do you live?		
	Please give the postal code of your home address: Date of complete the questionnaire.....		

Thank you again for your support!