Shenandoah National Park
Visitor Study

The Visitor Services Project
United States Department of the Interior

NATIONAL PARK SERVICE
Shenandoah National Park
3655 U.S. Highway 211 East
Luray, Virginia 22835-9036

IN REPLY REFER TO:

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Shenandoah National Park. This will assist us in our efforts to better manage this site and to serve you, the visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take a few minutes after your visit.

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, VSP Coordinator, Cooperative Park Studies Unit, College of Natural Resources, P.O. Box 441133, University of Idaho, Moscow, Idaho 83844-1133, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

Douglas K. Morris
Superintendent
DIRECTIONS
One adult in your group should complete the questionnaire. It should only take a few minutes. When you have completed the questionnaire, please seal it with the sticker provided and drop it in any U.S. mailbox. We appreciate your help.

PRIVACY ACT and PAPERWORK REDUCTION ACT statement: 16 U.S.C. 1a-7 authorizes collection of this information. 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 group on the questionnaire. Data collected through visitor surveys may be disclosed to the Department of Justice when relevant to litigation or anticipated litigation, or to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting a violation of law. 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 12 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.
YOUR VISIT TO SHENANDOAH NATIONAL PARK

1. a) Prior to this trip, how did you and your group obtain information about Shenandoah National Park? Please check (√) all that apply.

   _____ RECEIVED NO INFORMATION PRIOR TO VISIT ➔ Go on to Question 2

b) Prior to future visits to Shenandoah National Park, what sources would you and your group prefer to use to obtain information in planning your visit?

   Prior to this visit? (✓) ________________________________ Prior to future visits? (✓)

   _____ PERSONAL EXPERIENCE
   _____ PREVIOUS VISIT(S)
   _____ WORD OF MOUTH/ FRIENDS/ RELATIVES
   _____ TRAVEL GUIDE/ TOUR BOOK
   _____ TELEPHONE/ WRITTEN INQUIRY TO PARK
   _____ TELEPHONE/ WRITTEN INQUIRY TO ARAMARK (park concessioner)
   _____ TELEVISION/ RADIO PROGRAMS
   _____ SCHOOL PROGRAM THAT CHILD ATTENDED
   _____ NEWSPAPER/ MAGAZINE ARTICLES
   _____ PARK INTERNET/ WEB SITE (www.nps.gov/shen/)
   _____ PARK CONCESSIONER WEB SITE (www.visitshenandoah.com)
   _____ CHAMBER OF COMMERCE/ VISITOR BUREAU
   _____ LOCAL BUSINESSES
   _____ OTHER
   (Please specify:_________________________________________)

2. How did this visit to Shenandoah National Park (NP) fit into your travel plans?

   _____ SHENANDOAH NP WAS THE PRIMARY DESTINATION
   _____ SHENANDOAH NP WAS ONE OF SEVERAL DESTINATIONS
   _____ SHENANDOAH NP WAS NOT A PLANNED DESTINATION
3. For you and your group on this trip, how important were the following reasons for visiting Shenandoah National Park? Please circle one answer for each feature or quality.

<table>
<thead>
<tr>
<th>Reasons for visiting</th>
<th>Not important</th>
<th>Moderately important</th>
<th>Extremely important</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>VISIT A NATIONAL PARK</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>VIEW WILDLIFE/ PLANTS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>HIKE LESS THAN 2 HOURS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>HIKE 2 HOURS OR MORE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>ENJOY SOLITUDE/ NATURAL QUIET</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EXPERIENCE NIGHT SKY</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EXPERIENCE WILDERNESS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>PARTICIPATE IN EDUCATIONAL OPPORTUNITIES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>ATTEND RANGER-LED PROGRAMS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>STAY OVERNIGHT IN A NATURAL SETTING</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>STAY OVERNIGHT IN AN HISTORIC SETTING</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>PICNIC</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>VIEW SCENIC DRIVE AND OVERLOOKS</td>
<td></td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EXPLORE HISTORIC FEATURES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>OTHER (Please specify:____________________________________)</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

4. On this trip, how much time did you and your group spend in Shenandoah National Park?

   If less than 24 hours  ____ NUMBER OF HOURS  
   (Please list partial hours as 1/4, 1/2, 3/4)

   If 24 hours or more  ____ NUMBER OF DAYS  
   (Please list partial days as 1/4, 1/2, 3/4)

Please go on to the next page ➔
5. On this visit, what kind of personal group (not tour/ school group) were you with? Please check (✓) only one.

   ______ ALONE
   ______ FAMILY
   ______ FRIENDS
   ______ FAMILY AND FRIENDS
   ______ OTHER (Please describe______________________________)

6. On this visit, how many people were in your personal group, including yourself?

   ______ NUMBER OF PEOPLE

7. For you and your personal group on this visit, please indicate:

<table>
<thead>
<tr>
<th>Current age</th>
<th>U.S. Zip Code or name of foreign country</th>
<th>Number of visits to Shenandoah NP (including this visit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YOURSELF</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #2</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #3</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #4</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #5</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #6</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
<tr>
<td>MEMBER #7</td>
<td>_________________________________</td>
<td>______  _______</td>
</tr>
</tbody>
</table>
8. a) Please (✓) check all of the interpretive or visitor services that you and your group **used** during this visit to Shenandoah National Park.

b) Next, for only those services that you and your group **used**, please rate their **importance** from 1-5.

c) Finally, for only those services that you and your group **used**, please rate their **quality** from 1-5.

<table>
<thead>
<tr>
<th>Use service?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (✓)</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>PARK BROCHURE/ MAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARK VISITOR GUIDE</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(Shenandoah Overlook)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SHENANDOAH MAGAZINE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BULLETIN BOARDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DICKEY RIDGE VISITOR CENTER EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BYRD VISITOR CENTER EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXHIBIT PANELS AT OVERLOOKS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXHIBIT PANELS AT TRAILHEADS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FREE TRAIL MAPS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAIL BOOKLETS <em>(Frazier Discovery Trail, Stony Man Trail, Fox Hollow Trail)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SALES PUBLICATIONS AT VISITOR CENTERS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASSISTANCE FROM PARK STAFF (at visitor centers, campgrounds, entrance stations)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARK TRAVELERS INFORMATION RADIO STATION (AM 1610)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RANGER-LED PROGRAMS/ WALKS</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Please go on to the next page** ➔
The following three questions address concession services and facilities and are listed by their location (from north to south) in Shenandoah National Park.

9. a) Please (✓) check all of the concession services and facilities that you and your group **used** during this visit to Shenandoah National Park.

   b) Next, for **only** those facilities that you and your group **used**, please rate their **importance** from 1-5.

   c) Finally, for only those facilities that you and your group **used**, please rate their **quality** from 1-5.

<table>
<thead>
<tr>
<th>Use concession service/ facility?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (✓)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

**Elkwallow**

- CAMPSTORE/ GIFT SHOP
- GAS STATION
- FOOD COUNTER
- RESTROOMS
- ASSISTANCE FROM STAFF

**Panorama**

- RESTAURANT
- GIFT SHOP
- RESTROOMS
- ASSISTANCE FROM STAFF

**Skyland**

- LODGING
- DINING ROOM
- TAP ROOM
- GIFT SHOP
- RESTROOMS
- HORSEBACK RIDING
- CONFERENCE HALL
- ASSISTANCE FROM STAFF
- SPECIAL EVENT OR ACTIVITY:  

(Please describe:____________________________________________________)

**Shenandoah National Park Visitor Study**
10. The following services and facilities are listed by their location in Shenandoah National Park.

a) Please (√) check all of the concession services and facilities that you and your group used during this visit to Shenandoah National Park.

b) Next, for only those services and facilities that you and your group used, please rate their importance from 1-5.

c) Finally, for only those services and facilities that you and your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>Use concession service/facility?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (√)</td>
<td>Not important</td>
<td>Extremely important</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

**Big Meadows Lodge**

- _____ LODGING
- _____ DINING ROOM
- _____ TAP ROOM
- _____ RESTROOMS
- _____ GIFT SHOP
- _____ ASSISTANCE FROM STAFF
- _____ SPECIAL EVENT OR ACTIVITY: __________________
  (Please describe: _____________________________________)

**Big Meadows Wayside**

- _____ CAMPSTORE
- _____ FOOD SERVICE
- _____ SHOWERS/ LAUNDRY
- _____ GAS STATION
- _____ GIFT SHOP
- _____ RESTROOMS
- _____ ASSISTANCE FROM STAFF

**Lewis Mountain Campground**

- _____ CAMPSTORE
- _____ SHOWERS/ LAUNDRY
- _____ ASSISTANCE FROM STAFF

Please go on to the next page ➔
11. The following services and facilities are listed by their location in Shenandoah National Park.

a) Please (✓) check all of the concession services and facilities that you and your group used during this visit to Shenandoah National Park.

b) Next, for only those services and facilities that you and your group used, please rate their importance from 1-5.

c) Finally, for only those services and facilities that you and your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>Use concession service/facility?</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (✓)</td>
<td>Not important</td>
<td>Extremely important</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Loft Mountain

_____ FOOD SERVICE/ DINING AREA
_____ CAMPSTORE
_____ GIFT SHOP
_____ SHOWERS/ LAUNDRY
_____ ASSISTANCE FROM STAFF

12. Is there anything else you would like to tell us about the concession services or facilities in Shenandoah National Park?

________________________________________________________________________

________________________________________________________________________

13. a) On this trip to Shenandoah National Park, did you and your group stay in a developed campground inside and/ or outside the park?

_____ YES   _____ NO  ➔ Go on to Question 15

b) If YES, what kind of camping equipment did you use? Please check (✓) all that apply.

_____ TENT   _____ RV/ CAMPER

c) Please list the number of nights you camped inside and/ or outside the park.

NUMBER OF NIGHTS CAMPED IN SHENANDOAH NP    _____
NUMBER OF NIGHTS CAMPED OUTSIDE SHENANDOAH NP    _____
14. a) If you camped in Shenandoah National Park on this trip, in which campground(s) did you and your group stay? Please check (√) all that apply.

_____ DID NOT STAY IN PARK CAMPGROUND ➔ Go on to Question 15

_____ LOFT MOUNTAIN
_____ LEWIS MOUNTAIN
_____ BIG MEADOWS
_____ MATHEWS ARM

b) Please rate the importance of each of the following campground services/ facilities/ characteristics that you and your group used or experienced during this stay in Shenandoah National Park.

c) Please rate the quality of each of the following campground services/ facilities/ characteristics that you and your group used or experienced during this stay in Shenandoah National Park.

<table>
<thead>
<tr>
<th>Campground service/ facility/ characteristic</th>
<th>If used, how important?</th>
<th>If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not important</td>
<td>Extremely important</td>
</tr>
<tr>
<td></td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

Campground service/ facility

RESTROOMS
SHOWERS
LAUNDRY
TELEPHONE NEARBY
CAMPSTORE NEARBY
FOOD SERVICE NEARBY
PRE-TRIP RESERVATIONS
PRIMITIVE SITES
PAVED PARKING PADS
TENT PADS
DUMP STATION

Campground characteristic

NEATNESS OF SITE
QUIET AT NIGHT
PRIVACY
SOCIAL INTERACTION WITH OTHER CAMPERS

Please go on to the next page ➔
d) Is there anything else you and your group want to tell us about the park campground services that are currently provided?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

15. If you and your group did not stay overnight in Shenandoah National Park lodging or campgrounds, please explain why.

____________________________________________________________________

____________________________________________________________________

16. a) For the questions below, please indicate from 1 to 5 how safe you and your group felt from crime and accidents during this visit to Shenandoah National Park? Please circle one answer for each question.

<table>
<thead>
<tr>
<th>Safety issue</th>
<th>Very Unsafe</th>
<th>Somewhat Unsafe</th>
<th>No Opinion</th>
<th>Somewhat Safe</th>
<th>Very Safe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal safety—from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal safety—from accidents</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal property—from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

b) If you marked that you felt unsafe (if you circled 1 or 2) on any of the above questions, please explain why:

____________________________________________________________________

____________________________________________________________________
17. For the questions below, please indicate from 1 to 5 how safe you and your group feel from crime and accidents in the town/city closest to your home? Please circle only one answer for each question.

How safe do you feel in your home town/city?

<table>
<thead>
<tr>
<th>Safety issue</th>
<th>Very Unsafe</th>
<th>Somewhat Unsafe</th>
<th>No Opinion</th>
<th>Somewhat Safe</th>
<th>Very Safe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal safety—from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal safety—from accidents</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal property—from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

18. On a future visit to Shenandoah National Park, would you and your group be willing to ride a shuttle bus to the following locations?

a) Shenandoah NP facilities and/or trailheads

_____ YES, LIKELY  _____ NO, NOT LIKELY  _____ NOT SURE

b) Other local attractions outside Shenandoah NP (within 50 miles of the park)

_____ YES, LIKELY  _____ NO, NOT LIKELY  _____ NOT SURE

c) Would you be willing to pay a modest fee for this service in addition to the park entrance fee?

_____ YES, LIKELY  _____ NO, NOT LIKELY  _____ NOT SURE

Please go on to the next page ➔
19. For each of the following attributes of Shenandoah National Park, please rate its importance (from 1 to 5) in planning for the preservation of the park for future generations. Please circle one answer for each attribute.

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Not important</th>
<th>Moderately important</th>
<th>Extremely important</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOREST</td>
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<td>3</td>
<td>4</td>
</tr>
<tr>
<td>WILDLIFE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>CLEAN AIR</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>CLEAN WATER</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>HISTORIC FEATURES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>WILDERNESS/ BACKCOUNTRY</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>DEVELOPED CAMPGROUND FACILITIES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>NATURAL QUIET/ SOUNDS OF NATURE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>RANGER-LED PROGRAMS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>SOLITUDE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EDUCATIONAL OPPORTUNITIES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
20. Is there anything else you and your group would like to tell us about your visit to Shenandoah National Park?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

21. Overall, how would you rate the quality of the visitor services provided to you and your group at Shenandoah National Park during this trip? Please circle only one.

VERY GOOD   GOOD   AVERAGE   POOR   VERY POOR

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

Visitor Services Project
Cooperative Park Studies Unit
College of Natural Resources
P.O. Box 441133
University of Idaho
Moscow, Idaho 83844-1133