Shenandoah Visitor Study

The Visitor Services Project
Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Shenandoah enjoy, the places they visit within the park, and to more accurately count visitors.

This questionnaire is only being given to a select number of visitors. Your participation is very important. It should only take a few minutes of your time during your visit to Shenandoah.

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

Please be assured that all of the information is confidential. Do not write your name on the questionnaire. If you have any questions, please contact Dr. Gary E. Machlis, Sociology Project Leader, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83843.

We appreciate your help.

Sincerely,

Ronald Wrye,
Superintendent

DIRECTIONS

One person 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. No postage is needed.

IMPORTANT

When did you first enter Shenandoah National Park this visit?

____ DAY OF THE WEEK (M,T,W,Th,F,S,Su) 
____ TIME OF DAY ____ am. ____ pm.

PLEASE GO ON TO NEXT PAGE
YOUR ACTIVITIES

On the list below, please check (✓) the activities that you or your group did in Shenandoah National Park. (Please check all that apply)

_______ PICNIC
_______ HIKE FOR LESS THAN 2 HOURS
_______ HIKE FOR MORE THAN 2 HOURS
_______ CAMP IN CAMPGROUND
_______ CAMP IN BACKCOUNTRY
_______ STAY OVERNIGHT AT LODGE OR CABINS
_______ VISIT VISITOR CENTER AT DICKEY RIDGE
_______ VISIT VISITOR CENTER AT BIG MEADOWS
_______ USE GAS STATION/RESTAURANT/STORE
_______ STOP AT OVERLOOKS
_______ FISH
_______ BICYCLE
_______ ATTEND RANGER-LED WALK OR TALK
_______ ATTEND EVENING SLIDE PROGRAM
_______ OTHER (Please describe: __________________________)

YOU AND YOUR OPINIONS

We hope you enjoyed your visit to Shenandoah National Park. Below are several questions that will help us learn about the people who participated in the study and their thoughts about the park.

1. How many days did you spend in Shenandoah National Park this visit?
   _______ NUMBER OF DAYS

2. How many people were in your group?
   _______ NUMBER OF PEOPLE

3. What kind of group were you with?
   _______ ALONE
   _______ FAMILY
   _______ FRIENDS
   _______ FAMILY AND FRIENDS
   _______ GUIDED TOUR GROUP
   _______ OTHER GROUP (please describe: __________________________)
   __________________________
4. For yourself and each member of your group, please indicate:

1) your age on your last birthday

2) the zip code of your permanent residence (if you are from a country other than the United States, please give the name of that country), and

3) the number of times you have visited Shenandoah National Park, including this visit.

<table>
<thead>
<tr>
<th>AGE</th>
<th>ZIP CODE</th>
<th>TIMES VISITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>YOURSELF</td>
<td></td>
<td></td>
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<tr>
<td>MEMBER #2</td>
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<td>MEMBER #3</td>
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<tr>
<td>MEMBER #5</td>
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5. Where did you start your trip on the day you arrived in Shenandoah National Park?

   ___________________________  NEAREST TOWN

   ___________________________  STATE

6. Which exit did you use when leaving Shenandoah National Park? (Check one.)

   ________ FRONT ROYAL (NORTH EXIT)
   ________ THORNTON GAP (U.S. 211)
   ________ SWIFT RUN GAP (U.S. 33)
   ________ ROCKFISH GAP (SOUTH EXIT)

7 a. During this visit did you use any of the following information or services at Shenandoah National Park? (Please check all that apply.)

   b. How useful were the services you used? (Please mark each service you checked from 1 to 5 (1=EXTREMELY USEFUL, 2=VERY USEFUL, 3=MODERATELY USEFUL, 4=SOMewhat USEFUL, 5=NOT USEFUL) in the column on the right.)

   Use service? (✓)  Rating? (#)

   ________ PARK NEWSPAPER (Shenandoah Overlook)
   ________ WAYSIDE/OVERLOOK EXHIBITS
   ________ VISITOR CENTER EXHIBITS
   ________ VISITOR CENTER FILMS
   ________ BULLETIN BOARDS
   ________ SELF-GUIDED TRAILS
   ________ RANGER-LED PROGRAMS (talks, walks, etc)
   ________ BROCHURES AND BOOKLETS
8. Prior to this visit, how did you and your group get information about Shenandoah National Park? (Please check all that apply.)

- TRAVEL GUIDE/TOUR BOOK (from travel agent, AAA, etc.)
- NEWSPAPER ARTICLES
- MAPS OR BROCHURES (from state, hotel, etc.)
- ADVICE FROM FRIEND OR RELATIVE
- PREVIOUS VISIT(S)
- DID NOT GET INFORMATION PRIOR TO VISIT
- OTHER (Please describe: ________________________)

9. Did you find it difficult to locate Shenandoah National Park?

- YES
- NO

If so, why was it difficult to locate the park?

__________________________________________________________________________
__________________________________________________________________________

How could locating the park be improved?

__________________________________________________________________________
__________________________________________________________________________

10. During this visit to Shenandoah National Park, did you and your group stop at Big Meadows?

- YES
- NO

If so, please check the activities that you and your group did at Big Meadows. (Please check all that apply.)

- VISIT VISITOR CENTER
- EAT AT LODGE DINING ROOM
- USE GAS STATION/STORE/GIFT SHOP
- PICNIC
- WALK INTO MEADOW
- STAY IN LODGE
- STAY IN CAMPGROUND
- HIKE DARK HOLLOW FALLS TRAIL

11. Is there anything else you would like to tell us about your visit to Shenandoah National Park?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

___________________________________________

Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox—no postage is needed.