Craters of the Moon
National Monument and Preserve

Visitor Study
Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Craters of the Moon National Monument & Preserve. This information will assist us in our efforts to better manage this site and to serve you, our 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 to complete.

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, NPS VSP Coordinator, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

James A. Morris
Superintendent

This visitor study is partially funded by Fee Demonstration Funding.
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 stickers 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 20 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.

Please go on to the next page ➔
YOUR VISIT TO CRATERS OF THE MOON NATIONAL MONUMENT & PRESERVE

1. a) Prior to this visit, how did you and your group obtain information about Craters of the Moon National Monument and Preserve (NM & PRES)? Please check (√) all that apply in the column on the left below.

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

b) On future trips to Craters of the Moon NM & PRES, what sources would you and your group prefer to use to obtain information in planning your visit? Please check (√) all that apply in the column on the right below.

   a) Prior to this visit? (√)
   _____ PREVIOUS VISIT(S)  
   _____ FRIENDS/RELATIVES/WORD OF MOUTH  
   _____ TRAVEL GUIDE/TOUR BOOK/PUBLICATIONS  
   _____ MAPS/BROCHURES  
   _____ TELEPHONE/Written/EMAIL INQUIRY TO PARK  
   _____ STATE WELCOME CENTER  
   _____ CHAMBER OF COMMERCE  
   _____ NEWSPAPER/MAGAZINE ARTICLES  
   _____ TELEVISION/RADIO/VIDEOS  
   _____ NATIONAL PARK SERVICE (NPS) WEBSITE <www.nps.gov/crmo/>  
   _____ BUREAU OF LAND MANAGEMENT (BLM) WEBSITE <www.id.blm.gov/craters/index.htm>  
   _____ OTHER INTERNET/WEBSITE  
   _____ OTHER UNIT OF NATIONAL PARK SYSTEM: (Please specify: ____________________________)  
   _____ OTHER (Please specify: ____________________________)  

c) From the sources checked above, did you and your group receive the type of information about the park that you needed?

   _____ NO  
   _____ YES  
   _____ NOT SURE  ➔ Go on to Question 2

d) If NO, what type of park information did you and your group need that was not available? Please be specific.

   __________________________________________________________

   __________________________________________________________
2. On this trip, what was the **primary** reason that you and your group visited the Craters of the Moon NM & PRES area (within a 1-hour drive)? Please check (✓) only **one**.

- [ ] RESIDENT OF AREA  ➔ Go on to Question 3
- [ ] VISIT CRATERS OF THE MOON NM & PRES
- [ ] VISIT OTHER AREA ATTRACTIONS (such as Yellowstone & Grand Teton National Parks, Sun Valley, Sawtooth National Recreation Area)
- [ ] VISIT FRIENDS/RELATIVES IN THE AREA
- [ ] PASSING THROUGH—UNPLANNED VISIT
- [ ] BUSINESS OR OTHER REASONS

3. a) On this trip, did you and your group stay overnight away from home in Craters of the Moon NM & PRES and/or the area (within a 1-hour drive)?

- [ ] YES  [ ] NO  ➔ Go on to Question 4

b) Please list the number of nights you and your group stayed.

  NUMBER OF NIGHTS in Craters of the Moon NM & PRES  
  NUMBER OF NIGHTS in Craters of the Moon NM & PRES area

c) In what type of lodging did you and your group spend the night(s)? Please check (✓) all that apply.

- [ ] Inside park
- [ ] Outside park in surrounding area

  LODGE, MOTEL, CABIN, RENTED CONDO/HOME, OR 
  BED & BREAKFAST
  RV/TRAILER CAMPING
  TENT CAMPING IN DEVELOPED CAMPGROUND
  BACKCOUNTRY CAMPSITE
  PERSONAL SEASONAL RESIDENCE
  RESIDENCE OF FRIENDS OR RELATIVES
  OTHER (Please specify:______________________________)

4. a) On this trip, where did you and your group stay on the night prior to visiting Craters of the Moon NM & PRES?

CITY/TOWN _____________________  STATE ________________

Please go on to the next page ➔
b) Where did you stay on the night after leaving Craters of the Moon NM & PRES?

CITY/TOWN __________________________ STATE ________________

5. a) What services did you and your group use in the "gateway" communities of Arco or Carey that were specifically related to this park visit?

Used on this visit (✓) __________________________ Would have used if available (✓)

- BUY GASOLINE __________________________
- EAT A MEAL __________________________
- STAY OVERNIGHT IN A MOTEL _____________
- STAY OVERNIGHT IN A RV PARK/CAMPGROUND ___________
- SHOP __________________________
- OBTAIN INFORMATION ABOUT CRATERS OF THE MOON NM & PRES ___________
- OBTAIN OTHER TRAVEL/TOURISM INFORMATION ___________
- OTHER (Please specify: __________________________) ___________

b) Do you have any comments about the above services?

Service (list) __________________________ Comments--please be specific:

____________________________________
____________________________________

6. On this visit, what was your primary reason for visiting Craters of the Moon NM & PRES? Please check (✓) only one.

- GENERAL SIGHTSEEING ___________
- GEOLOGY ___________
- WILDFLOWERS ___________
- WILDLIFE ___________
- VISIT A NATIONAL MONUMENT ___________
- RECREATION (camping, hiking, etc.) ___________
- OTHER (Please specify: __________________________) ___________

7. a) On this visit, which of the following routes did you and your group use to arrive at Craters of the Moon NM & PRES? Please check (✓) all that apply.

- U.S. HIGHWAY 20/26/93 FROM EAST ___________
- U.S. HIGHWAY 20/26/93 FROM WEST ___________
- OTHER (Please specify: __________________________) ___________
b) On this visit, did you and your group have any trouble locating the park?
   _____ YES _____ NO  ➔ Go on to Question 8

c) If YES, please explain the problems: __________________________________________

8.  a) On this visit, did you and/or your group walk/hike on a trail in Craters of the Moon NM & PRES?
   _____ YES _____ NO  ➔ Go on to Question 10

   b) If YES, which of the following trails did you walk/hike? Please check (✓) all that apply. See map below.
      _____ NORTH CRATER FLOW  _____ NORTH CRATER
      _____ DEVILS ORCHARD  _____ INFERNO CONE
      _____ BIG CRATER/SPATTER CONES  _____ TREE MOLDS
      _____ BROKEN TOP LOOP/WILDERNESS  _____ CAVES
      _____ OTHER (Please specify: ____________________________)

Please go on to the next page ➔
9. a) On this visit, how long did you and your group stay in Craters of the Moon NM & PRES? (Please list partial hours or days, for example: 6-1/2 hours, 1-1/4 days).
   
   If less than 24 hours: ______ NUMBER OF HOURS

   If 24 hours or more: ______ NUMBER OF DAYS

b) If you stayed outside Craters of the Moon NM & PRES, did you visit the monument on more than one day on this visit?
   ______ NO  ______ YES ➔ c) If YES, on how many days did you visit?

   NUMBER OF DAYS ______

c) How many times did you enter Craters of the Moon NM & PRES on this visit?

   NUMBER OF ENTRIES ______

10. In 2000, Craters of the Moon National Monument was expanded from just under 54,000 acres to over 754,000 acres by presidential proclamation in order to protect the entire Great Rift geological zone.

   a) During this visit were you and your group made aware of the fact that Craters of the Moon NM and PRES is jointly administered by the National Park Service and the Bureau of Land Management? Please check (✓) only one.

   ______ YES  ______ NO  ______ ALREADY AWARE

b) In your opinion, what is most important about the newly designated areas of Craters of the Moon NM & PRES?

   ____________________________________________

   ____________________________________________

11. On a future visit to Craters of the Moon NM & PRES, what facilities/uses would you like to have available in the newly designated areas of the Monument & Preserve? Please check (✓) all that apply.

   ______ NO NEW FACILITIES/SERVICES, LEAVE AS IS ➔ Go on to Question 12

   ______ IMPROVED MAPS OF EXPANDED AREA

   ______ IMPROVED ROAD ACCESS

   ______ 4-WHEEL DRIVE ROAD ACCESS

   ______ ROAD/TRAVEL SIGNS

   ______ INTERPRETIVE SIGNS

   ______ DEVELOPED CAMPSITES

   ______ MAINTAINED TRAILS

   ______ OUTFITTERS/GUIDES
12. On this visit to Craters of the Moon NM & PRES, in what activities did you and your group participate? Please check (√) all that apply.

- [ ] TAKING SCENIC DRIVE (Loop Road)/SIGHTSEEING ONLY
- [ ] READING/VIEWING VISITOR CENTER MUSEUM EXHIBITS
- [ ] DRIVING BACKCOUNTRY ROADS
- [ ] ATTENDING RANGER-GUIDED WALKS/TALKS
- [ ] SHOPPING IN VISITOR CENTER BOOKSTORE
- [ ] WALKING/HIKING LESS THAN 1 HOUR
- [ ] WALKING/HIKING 1 HOUR OR MORE
- [ ] CAMPING IN DEVELOPED CAMPGROUND
- [ ] OVERNIGHT BACKPACKING
- [ ] PICNICKING
- [ ] BICYCLING
- [ ] PHOTOGRAPHY
- [ ] CAVE EXPLORING
- [ ] STUDY GEOLOGY
- [ ] OTHER (Please describe: ________________________________)

Please go on to the next page ➔
13. a) Please check (√) the visitor services and facilities that you or your group used during this visit to Craters of the Moon NM & PRES.

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

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

<table>
<thead>
<tr>
<th>Use facility/service?</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>Check (√)</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>MONUMENT BROCHURE/MAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VISITOR CENTER EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAILSIDE EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ROADSIDE EXHIBITS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PRINTED TRAIL GUIDES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SALES ITEMS IN BOOKSTORE (visitor center)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASSISTANCE FROM PARK STAFF</td>
<td></td>
<td></td>
</tr>
<tr>
<td>JUNIOR RANGER PROGRAM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RANGER-LED PROGRAMS (walks, talks, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NPS OR BLM WEB SITES used before or during visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESTROOMS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACCESS FOR DISABLED PERSONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CAMPGROUND</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAILS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRAVELERS INFORMATION RADIO STATION (AM 1610)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. a) On this visit, did you and your group have any specific safety concerns while visiting Craters of the Moon NM & PRES?

   _____ YES  _____ NO  ➔ Go on to Question 15

If YES, what were they? 

______________________________________________________________________________
15. Craters of the Moon NM & PRES educational programs and exhibits discuss the following topics: volcanic history, human history, plant and animal adaptations, the preservation of park resources and wilderness.

a) During this visit, did you and your group learn about any of these topics?
   ____ YES  ____ NO  ____ NOT SURE

   \[Go on to Question 16\]

b) If YES, please check (✓) all of the topics you learned about on this visit.

c) Next, please indicate how much your level of understanding of each topic improved during your visit. Please circle one answer for each topic.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Not at all</th>
<th>A little</th>
<th>Somewhat</th>
<th>A lot</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>VOLCANIC/GEOLOGIC HISTORY</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>HUMAN HISTORY</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>PLANT/ANIMAL ADAPTATIONS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>PRESERVATION/MANAGEMENT OF PARK RESOURCES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
<tr>
<td>WILDERNESS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>DK</td>
</tr>
</tbody>
</table>

16. On this visit, what kind of personal group (not guided tour/ school group) were you with? Please check (✓) only one.
   ____ ALONE  ____ FAMILY
   ____ FRIENDS  ____ FAMILY AND FRIENDS
   ____ OTHER (Please describe: ________________________________)

17. a) On this visit, were you and your personal group with a guided tour group?
   ____ YES  ____ NO

   b) On this visit, were you and your personal group with an educational/school group?
   ____ YES  ____ NO

18. a) On this visit, how many people were in your personal group, including yourself?
   ____ NUMBER OF PEOPLE

   b) For this visit, please list the number of vehicles in which you and your group arrived.
   ____ NUMBER OF VEHICLES

   Please go on to the next page ➤
19. For you and your personal group, please indicate:

<table>
<thead>
<tr>
<th>Member</th>
<th>Current Age</th>
<th>U.S. Zip Code or Name of Foreign Country</th>
<th>Number of Visits Made to this Park (Including This Visit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yourself</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #2</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #3</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #4</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #5</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #6</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
<tr>
<td>Member #7</td>
<td>___</td>
<td>______________________________</td>
<td>___ ___</td>
</tr>
</tbody>
</table>

20. a) On this visit, did anyone in your personal group have any disabilities/impairments that limited their ability to visit/enjoy Craters of the Moon NM & PRES?

- _____ YES
- _____ NO  ➔ Go on to Question 21

b) If yes, what kind of disability? Please check (√) all that apply.

- ______ HEARING
- ______ VISUAL
- ______ MOBILITY
- ______ LEARNING
- ______ MENTAL/EMOTIONAL
- ______ OTHER (specify:____________________)

c) Because of the disability/impairment, did you and your group encounter any access/service problems in the park?

- _____ YES
- _____ NO  ➔ Go on to Question 21

d) If YES, what were the problems? __________________________

21. a) Did you and your group feel crowded during this visit to Craters of the Moon NM & PRES? Please rate how crowded you felt by circling one answer below.

- VERY CROWDED
- SOMEWHAT CROWDED
- NEITHER CROWDED NOR UNCROWDED
- SOMEWHAT UNCROWDED
- VERY UNCROWDED

b) If you rated the park as "very crowded" or "somewhat crowded," please list where you felt crowded.

__________________________________________
22. For each of the following attributes of Craters of the Moon NM & PRES, please rate its importance (from 1 to 5, or DK for “don’t know”) 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>NATIVE VEGETATION</td>
<td>1</td>
<td>2</td>
<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>SCENIC VIEWS</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>GEOLOGY/ROCK FORMATIONS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>EXPLORING/VISITING CAVES</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>RECREATIONAL FACILITIES (campgrounds, trails, etc.)</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>SOLITUDE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>NIGHT SKY/STARGAZING</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>INTERPRETIVE/EDUCATIONAL PROGRAMS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>MONUMENT STAFF</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>SCENIC LOOP DRIVE</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>WILDERNESS/BACKCOUNTRY AREAS</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

23. On a future visit to Craters of the Moon NM & PRES, how would you and your group prefer to learn about the cultural and natural history? Please check (√) all that apply.

- [ ] NOT INTERESTED IN LEARNING ABOUT MONUMENT ➔ Go on to Question 24
- [ ] TRAVEL GUIDES/GUIDEBOOKS
- [ ] OTHER PRINTED MATERIALS (books, brochures, maps, park newspaper, etc.)
- [ ] INTERNET/WEB SITES
- [ ] AUDIO-VISUAL PROGRAMS (videos, movies, slide shows, etc.)
- [ ] RANGER-GUIDED WALKS/PROGRAMS
- [ ] ROVING RANGERS AVAILABLE TO ANSWER QUESTIONS
- [ ] PRINTED TRAIL GUIDES
- [ ] INDOOR EXHIBITS
- [ ] ROAD/TRAILSIDE EXHIBITS
- [ ] OTHER (Please specify ____________________________)

Please go on to the next page ➔
24. For you and your group, please report all expenditures for the items listed below for this visit to Craters of the Moon NM & PRES and surrounding area (within 50 miles). Please write "0" if no money was spent in a particular category.

   a) Please list your group's total expenditures inside Craters of the Moon NM & PRES.

   b) Please list your group's total expenditures in the area outside the park (within 50 miles of Craters of the Moon NM & PRES).

   NOTE: Surrounding area residents should only include expenditures that were directly related to this visit to Craters of the Moon NM & PRES.

<table>
<thead>
<tr>
<th>EXPENDITURES</th>
<th>Inside Craters of the Moon NM &amp; PRES</th>
<th>Outside Monument</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOTELS, MOTELS, CABINS, B&amp;B, etc.</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>CAMPING FEES AND CHARGES</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>RESTAURANTS AND BARS</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>GROCERIES AND TAKE OUT FOOD</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>GAS AND OIL (auto, RV, boat, etc.)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>OTHER TRANSPORTATION EXPENSES</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>(rental cars, auto repairs, taxies, but not including airfare)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>ADMISSIONS, RECREATION,</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>ENTERTAINMENT FEES</td>
<td></td>
<td>$__________</td>
</tr>
<tr>
<td>ALL OTHER PURCHASES (souvenirs, film, books, sporting goods, clothing, etc.)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

   c) How many people do the above expenses cover?

   ADULTS (18 years or over) _____  CHILDREN (under 18 years) _____

25. a) On a future visit, would you be likely visit the newly designated areas of Craters of the Moon NM & PRES?

   _____  YES, LIKELY  _____  NO, UNLIKELY  _____  NOT SURE

   b) On a future visit, would you be more likely to visit the newly designated areas of Craters of the Moon NM & PRES if outfitters/guides were available?

   _____  YES, LIKELY  _____  NO, UNLIKELY  _____  NOT SURE
26. a) What did you like **most** about your visit to Craters of the Moon NM & PRES?

b) What did you like **least** about your visit to Craters of the Moon NM & PRES?

27. If you were a manager planning for the future of Craters of the Moon NM & PRES, what would you propose? Please be specific.

28. Is there anything else you and your group would like to tell us about your visit to Craters of the Moon NM & PRES?

29. Overall, how would you rate the quality of the visitor services provided to you and your group at Craters of the Moon NM & PRES during this visit? 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
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
Moscow, Idaho 83844-1139