Delaware Water Gap
National Recreation Area
Visitor Study

The
Visitor Services
Project
July 1989

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Delaware Water Gap National Recreation Area 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 Delaware Water Gap National Recreation Area.

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.

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,

Richard G. Ring
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.

When did you and your group first arrive at Delaware Water Gap National Recreation Area this visit?
Circle the appropriate day of the week:

S  M  T  W  Th  F  S

Write in the hour:

TIME OF DAY _____a.m. OR _____p.m.

PLEASE GO ON TO NEXT PAGE
PLACES YOU VISITED

On the map below, please indicate the places you and your group visited at Delaware Water Gap National Recreation Area this trip. Simply check (✓) the box beside each place you visited. If you did not visit any of these places, please go on to page 6.

Delaware Water Gap National Recreation Area
YOUR ACTIVITIES

1. On the list below, please check (✓) the activities that you and your group did at Delaware Water Gap National Recreation Area. Please check all that apply.

   _____ BOATING
   _____ CANOEING/ TUBING
   _____ HIKING
   _____ CAMPING
   _____ PICNICKING
   _____ NATURE STUDY
   _____ SWIMMING
   _____ FISHING
   _____ SIGHTSEEING
   _____ VISITING HISTORIC SITES
   _____ OTHER (Please describe: ______________________)

YOU AND YOUR OPINIONS

2. How much time did you and your group spend at Delaware Water Gap National Recreation Area this visit?

   _____ NUMBER OF HOURS

3. How many people were in your group?

   _____ NUMBER OF PEOPLE
4. What kind of group were you with?

_____ ALONE

_____ FAMILY

_____ FRIENDS

_____ FAMILY AND FRIENDS

_____ GUIDED TOUR GROUP

_____ YOUTH GROUP

_____ OTHER (Please describe: _________________)

5. For you and 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 Delaware Water Gap National Recreational Area including this visit.

<table>
<thead>
<tr>
<th>AGE</th>
<th>ZIP CODE (country)</th>
<th># TIMES VISITED</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>
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<tr>
<td>MEMBER #4</td>
<td>_____</td>
<td>____________</td>
</tr>
<tr>
<td>MEMBER #5</td>
<td>_____</td>
<td>____________</td>
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<tr>
<td>additional members</td>
<td>___________________</td>
<td>__________________</td>
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</tbody>
</table>

PLEASE GO ON TO NEXT PAGE
5. Where did your trip begin on the day you visited Delaware Water Gap National Recreation Area?
_________________________ TOWN
_________________________ STATE

6. Where is your planned destination on the day you leave Delaware Water Gap National Recreation Area?
_________________________ TOWN
_________________________ STATE

7. Prior to this visit how did you and your group get information about Delaware Water Gap National Recreation Area? Please check (√) all that apply.
   ______ TRAVEL GUIDE/TOUR BOOK
   ______ NEWSPAPER/MAGAZINE ARTICLES
   ______ MAPS
   ______ ADVICE FROM FRIENDS OR RELATIVES
   ______ PREVIOUS VISIT(S)
   ______ TELEPHONE INQUIRY TO THE PARK
   ______ WRITTEN INQUIRY TO THE PARK
   ______ NO INFORMATION PRIOR TO VISIT
   ______ OTHER (Please describe: ____________________________
                     ____________________________ )
8. a) During this visit did you and your group use any of the following information or interpretive services at Delaware Water Gap National Recreational Area? Please check (✓) all that apply.

   b) How useful were the services you used? Please mark each service used from 1 to 5: (1 = EXTREMELY USEFUL, 2 = VERY USEFUL, 3 = MODERATELY USEFUL, 4 = SOMEWHAT USEFUL, 5 = NOT USEFUL).

<table>
<thead>
<tr>
<th>Use service?</th>
<th>How useful?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(✓) PARK FOLDER/MAP</td>
<td></td>
</tr>
<tr>
<td>(✓) INFORMATION FLYERS</td>
<td></td>
</tr>
<tr>
<td>(✓) PARK NEWSPAPER</td>
<td></td>
</tr>
<tr>
<td>(✓) CONTACT WITH PARK STAFF</td>
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<tr>
<td>(✓) SALES PUBLICATIONS</td>
<td></td>
</tr>
<tr>
<td>(✓) VISITOR CENTER EXHIBITS</td>
<td></td>
</tr>
<tr>
<td>(✓) SLIDE PROGRAM/VIDEO</td>
<td></td>
</tr>
<tr>
<td>(✓) RANGER-LED WALKS/TALKS</td>
<td></td>
</tr>
<tr>
<td>(✓) ROAD SIGNS</td>
<td></td>
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<tr>
<td>(✓) BULLETIN BOARDS</td>
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<tr>
<td>(✓) OTHER (Please describe:</td>
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<tr>
<td>__________________________________</td>
<td>-------------</td>
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PLEASE GO ON TO NEXT PAGE
9. What did you and your group like most about this visit to Delaware Water Gap National Recreation Area?
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________________________________________________________
________________________________________________________
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10. What did you and your group like least about this visit to Delaware Water Gap National Recreation Area?
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________________________________________________________
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________________________________________________________
11. Is there anything else you would like to tell us about your visit to Delaware Water Gap National Recreational Area?

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

Visitor Services Project
Cooperative Park Studies Unit
Department of Forest Resources
College of Forestry, Wildlife and Range Sciences
University of Idaho
Moscow, Idaho 83843