Muir Woods Visitor Study
Golden Gate National Recreation Area

The Visitor Services Project
August 1989

Dear Visitor:

Thank you for taking your time to participate in this study. Our objective is to learn about the expectations, opinions, and interests of visitors to Muir Woods National Monument. This will assist us in our efforts to better manage Muir Woods National Monument, and to serve you, the visitor.

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 Muir Woods National Monument.

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,

Brian O'Neill
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 enter Muir Woods National Monument this visit?

Please circle the appropriate day of the week:

S  M  T  W  Th  F  Sa
PLACES YOU VISITED

1. On the map below, please indicate the places you and your group visited in Muir Woods National Monument. Simply check (√) the box beside each place you visited.
YOUR ACTIVITIES

2. On the list below, please check all of the activities that you and your group did in Muir Woods National Monument. Please check (✓) all that apply.

   _____ SIGHTSEEING TRIP TO FAMOUS REDWOODS
   _____ NATURE STUDY
   _____ RANGER-LED PROGRAMS
   _____ SCHOOL PROGRAM
   _____ PHOTOGRAPHY OR OTHER ARTISTIC ACTIVITY
   _____ HIKE MORE THAN 2 HOURS
   _____ HIKE LESS THAN 2 HOURS
   _____ DAILY EXERCISE
   _____ OTHER (Please describe:__________________)

3. During this visit, where did you go in Golden Gate National Recreation Area? Please check (✓) all that apply.

   _____ MUIR BEACH
   _____ STINSON BEACH
   _____ MARIN HEADLANDS
   _____ ALCATRAZ
   _____ CLIFF HOUSE
   _____ FORT POINT
   _____ POINT REYES

PLEASE GO ON TO NEXT PAGE
4. a) During this visit did you and your group use any of the following interpretive or visitor services at Muir Woods National Monument. Please mark each service from 1 to 5 (1= EXTREMELY IMPORTANT, 2= VERY IMPORTANT, 3= MODERATELY IMPORTANT, 4= SOMEWHAT IMPORTANT, 5= NOT IMPORTANT).

b) Next, rate the quality of each service you or your group used during this visit to Muir Woods National Monument. Please mark each service used from 1 to 5 (1= VERY GOOD, 2= GOOD, 3= AVERAGE, 4= POOR, 5= VERY POOR).

<table>
<thead>
<tr>
<th>How important? (1-5)</th>
<th>What quality? (1-5)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>PARK BROCHURE</td>
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<tr>
<td></td>
<td>TRAIL MAPS</td>
</tr>
<tr>
<td></td>
<td>INTERPRETIVE TRAIL SIGNS</td>
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<td></td>
<td>VISITOR CENTER</td>
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<td></td>
<td>VISITOR CENTER EXHIBITS</td>
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<tr>
<td></td>
<td>EDUCATIONAL PUBLICATIONS</td>
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<tr>
<td></td>
<td>RANGER TOURS</td>
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<tr>
<td></td>
<td>SNACK BAR/GIFT SHOP</td>
</tr>
</tbody>
</table>
5. Do any members of your group reside outside the San Francisco area?

- [ ] YES  [ ] NO

a) If they stayed in the San Francisco Bay Area on the night before their visit to Muir Woods, how much did they spend for lodging?

$_______

b) On the day of your visit to Muir Woods, how much did you and your group spend for travel, food and other items in the San Francisco Bay Area? Please write "0" if you did not spend any money.

<table>
<thead>
<tr>
<th>SAN FRANCISCO BAY AREA</th>
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</thead>
<tbody>
<tr>
<td>TRAVEL (gas, bus fare, etc.)</td>
</tr>
<tr>
<td>FOOD (restaurant or self-prepared)</td>
</tr>
<tr>
<td>OTHER (film, gifts, etc.)</td>
</tr>
</tbody>
</table>

6. There are plans to add additional interpretive services at Muir Woods National Monument. Which of the following would be the most useful to you and your group? Please check (✓) only one.

- [ ] PUBLICATIONS (brochures, hiking maps, checklists)
- [ ] AUDIO-VISUAL MATERIAL (exhibits, cassettes, videos, car radio park information station)
- [ ] RANGER-LED PROGRAMS
- [ ] CHILDREN’S ACTIVITIES
- [ ] INFORMATION IN NEWSPAPERS, ON TV, RADIO
- [ ] OTHER (Please describe: ___________________________)

PLEASE GO ON TO NEXT PAGE
7. Shuttle and reservation systems are being considered to reduce congestion at Muir Woods National Monument.

a) A shuttle system is being considered to transport people to Muir Woods National Monument from a starting point away from the park. Which one of the following alternatives would you and your group prefer? Please check (✓) one.

- ______ SHUTTLE TO MUIR WOODS DURING HEAVY VISITATION
- ______ SHUTTLE TO MUIR WOODS YEAR ROUND
- ______ SHUTTLE SYSTEM TO MUIR WOODS AND OTHER AREA PARK/RECREATION SITES ON WEEKENDS

b) Would you and your group favor the use of a reservation system for Muir Woods National Monument during times of heaviest visitation?

- _____ YES _____ NO ➔ GO ON TO QUESTION 8

How would you and your group prefer to reserve tickets? Please check (✓) the one alternative you prefer.

- _____ BY TELEPHONE
- _____ BY MAIL
- _____ THROUGH HOTELS AND TRAVEL AGENTS
- _____ COMMERCIAL TICKET SERVICE
- _____ OTHER (Please describe: ____________________________

_______________________________
_______________________________)
YOU AND YOUR OPINIONS

8. When planning for this visit, how did you and your group get information about Muir Woods National Monument? Please check (✓) all that apply.

- TRAVEL GUIDE/TOUR BOOK
- NEWSPAPER ARTICLES
- MAPS OR BROCHURES
- ADVICE FROM FRIEND OR RELATIVE
- PREVIOUS VISIT(S)
- DID NOT GET INFORMATION PRIOR TO VISIT
- OTHER (Please describe: __________________________

9. How much time did you and your group spend in Muir Woods National Monument this visit?

- NUMBER OF HOURS

10. How many people were in your group?

- NUMBER OF PEOPLE

PLEASE GO ON TO NEXT PAGE
11. What kind of group were you with?

- _____ ALONE
- _____ FAMILY
- _____ FRIENDS
- _____ FAMILY AND FRIENDS
- _____ GUIDED TOUR GROUP
- _____ OTHER (Please describe:_________________________)

12. 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 Muir Woods National Monument including this visit.

<table>
<thead>
<tr>
<th></th>
<th>AGE</th>
<th>ZIP CODE</th>
<th># TIMES VISITED</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>
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<tr>
<td>MEMBER #4</td>
<td>_____</td>
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<td>_____</td>
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<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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</table>
13. Is there anything else you would like to tell us about your visit to Muir Woods National Monument?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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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

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College of Forestry, Wildlife and Range Sciences
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