

# DRY TORTUGAS NATIONAL PARK Visitor Study



**The  
Visitor Services  
Project**



### 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 authorize 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.

**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 Service Information Collection Clearance Officer, National Park Service, P.O. Box 37127, Washington, D.C. 20013-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0000, Washington, D.C. 20503.

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## YOUR VISIT TO DRY TORTUGAS NATIONAL PARK

1. Prior to your visit, how did you and your group learn about Garden Key/Fort Jefferson? Please check (✓) **all** that apply.

\_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT → **Go on to question 2**

\_\_\_\_\_ COMMERCIAL TRANSPORT OPERATORS (seaplane, vessels, helicopters)

\_\_\_\_\_ LOCAL NEWSPAPERS

\_\_\_\_\_ PARK BROCHURES

\_\_\_\_\_ GUIDEBOOKS

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

2. What forms of transportation did you and your group use to arrive at Dry Tortugas National Park on this visit? Please check (✓) **all** that apply.

\_\_\_\_\_ AIR CHARTER (seaplane/helicopter)

\_\_\_\_\_ COMMERCIAL VESSEL

\_\_\_\_\_ PRIVATE SAILBOAT

\_\_\_\_\_ PRIVATE POWERBOAT

\_\_\_\_\_ PRIVATE SEAPLANE/HELICOPTER

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

**YOUR ACTIVITIES**

3. On the list below, please check (✓) **all** of the activities that you and your group participated in at Dry Tortugas National Park on this visit.

\_\_\_\_\_ BOAT

\_\_\_\_\_ FISH

\_\_\_\_\_ BIRD WATCH

\_\_\_\_\_ CAMP

\_\_\_\_\_ SCUBA DIVE

\_\_\_\_\_ SNORKEL

\_\_\_\_\_ VISIT FORT JEFFERSON

\_\_\_\_\_ PHOTOGRAPH

\_\_\_\_\_ WIND SURF/KAYAK

\_\_\_\_\_ PICNIC

\_\_\_\_\_ ATTEND INTERPRETIVE PROGRAM

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

**PLEASE GO ON TO NEXT PAGE**



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4. a) During this visit to Dry Tortugas National Park, did you or your group fish?

\_\_\_ NO                      → Go on to question 5

\_\_\_ NOT SURE            → Go on to question 5

\_\_\_ YES




b) If yes, how important was your fishing experience to this visit to Dry Tortugas National Park? Please circle only **one**.

Extremely Important	Very Important	Important	Somewhat Important	Not at all Important
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

c) On the map below, circle the number for each of the zones (1-5) that you and your group fished in during this visit to Dry Tortugas National Park. Please circle **all** that apply.

5. a) Did you and your group visit or plan to visit Loggerhead Key during this visit to Dry Tortugas National Park?

\_\_\_\_\_ NO                       **Go on to question 7**

\_\_\_\_\_ NOT SURE               **Go on to question 7**

\_\_\_\_\_ YES



- b) If yes, please check (✓) **all** of the activities that you and your group participated in (or plan to participate in) during your visit to Loggerhead Key.

\_\_\_\_\_ ANCHOR OVERNIGHT

\_\_\_\_\_ WALK THE BEACH

\_\_\_\_\_ FISH

\_\_\_\_\_ SNORKEL/DIVE

\_\_\_\_\_ BIRD WATCH

\_\_\_\_\_ HIKE INTERIOR TRAIL

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

**PLEASE GO ON TO NEXT PAGE**



### YOU AND YOUR OPINIONS

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

\_\_\_\_\_ NUMBER OF PEOPLE

7. On this visit, were you with an organized tour group?

\_\_\_\_\_ YES      \_\_\_\_\_ NO      \_\_\_\_\_ NOT SURE

8. On this visit, what kind of group were you with? Please check (✓) only **one**.

\_\_\_\_\_ ALONE

\_\_\_\_\_ FAMILY

\_\_\_\_\_ FRIENDS

\_\_\_\_\_ FAMILY AND FRIENDS

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

9. For you and your group, please indicate:

	<b>CURRENT AGE</b>	<b>U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY</b>	<b>NUMBER OF VISITS TO THIS PARK (INCLUDING THIS VISIT)</b>	
			PAST YEAR	PAST 5 YEARS
YOURSELF	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____



10. a) Please check (✓) the visitor services and facilities which you and your group **used** during this visit to Dry Tortugas National Park.
- b) Then, for only those services and facilities which you or your group used, please rate their **quality** from 1-5.

Use service or facility? If yes, check (✓)	If used, what quality?				
	Very good				Very poor
	1	2	3	4	5
_____ RANGER-LED INTERPRETIVE PROGRAMS					_____
_____ SELF-GUIDED TOUR					_____
_____ VISITOR CENTER EXHIBITS					_____
_____ OTHER EXHIBITS (not at visitor center)					_____
_____ PARK BROCHURE					_____
_____ PARK NEWSPAPER					_____
_____ VISITOR PROTECTION/ LAW ENFORCEMENT					_____
_____ RESTROOMS					_____
_____ VISITOR CENTER					_____
_____ DOCK					_____
_____ CAMPGROUND					_____
_____ BEACH/SWIM AREAS					_____
_____ ANCHORAGE					_____
_____ PICNIC AREA					_____

PLEASE GO ON TO NEXT PAGE 

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11. On this visit, what was your primary reason for visiting Dry Tortugas National Park? Please check (✓) only **one**.

\_\_\_\_\_ LEARN ABOUT HISTORY AT FORT JEFFERSON

\_\_\_\_\_ NATURE STUDY

\_\_\_\_\_ FISH

\_\_\_\_\_ OTHER OUTDOOR RECREATION (dive, boat, photograph, etc.)

\_\_\_\_\_ EXPERIENCE SOLITUDE

\_\_\_\_\_ IN TRANSIT TO OTHER DESTINATIONS

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

12. What did you like **most** about your visit to Dry Tortugas National Park?

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13. What did you like **least** about your visit to Dry Tortugas National Park?

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14. Overall, how would you rate the quality of the visitor services provided to you and your group at Dry Tortugas National Park during this visit? Please circle only **one**.

VERY GOOD

GOOD

AVERAGE

POOR

VERY POOR

15. If you were a manager planning for the future of Dry Tortugas National Park, what would you propose? Please be specific.

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16. Is there anything else you and your group would like to tell us about your visit to Dry Tortugas National Park?

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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.



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**OFFICIAL BUSINESS**

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