

Chamizal National Memorial 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, 1024-0194, Washington, D.C. 20503.

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Visiting Chamizal National Memorial

1. Before this visit, how did you and your group get information about Chamizal National Memorial? Please check (✓) **all** that apply.

_____ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**

_____ ANOTHER NATIONAL PARK SERVICE AREA

_____ TEXAS TOURIST INFORMATION CENTER

_____ TRAVEL GUIDE/ TOUR BOOK

_____ WORD OF MOUTH/ FRIENDS/ RELATIVES

_____ PREVIOUS VISIT(S)

_____ U.S. NEWSPAPER

_____ MEXICO NEWSPAPER

_____ MAGAZINES

_____ RADIO/ TV

_____ WRITTEN/ PHONE INQUIRY

_____ MAILING LIST/ INVITATIONS

_____ POSTERS/ CALENDAR OF EVENTS/ FLYERS

_____ TEACHERS/ SCHOOL

_____ OTHER (Please specify: _____)

2. On this visit, how much time did you and your group spend at Chamizal National Memorial?

NUMBER OF HOURS _____ AND/ OR MINUTES _____

3. On the list below, please check (√) **all** of the activities that you and your group participated in at Chamizal National Memorial during this visit.

_____ ATTEND OUTDOOR PERFORMANCE/ EVENT

_____ ATTEND THEATER PERFORMANCE

_____ VISIT LOS PAISANOS GALLERY

_____ PICNIC

_____ EXERCISE (walk, jog, etc.)

_____ RELAX

_____ VISIT VISITOR CENTER

_____ VIEW MUSEUM EXHIBITS

_____ VIEW VIDEO PROGRAM

_____ SHOP AT PARK BOOKSTORE

_____ OTHER (Please describe: _____)

4. In your opinion, what is the **primary** purpose of Chamizal National Memorial? Please check (√) **ONLY ONE**.

Check one

_____ PRESERVE OPEN SPACE IN A METROPOLITAN AREA

_____ PROVIDE RECREATION OPPORTUNITIES (picnic, walk, relax,
recreate, exercise)

_____ PROVIDE A COMMUNITY THEATER

_____ COMMEMORATE THE PEACEFUL SETTLEMENT OF A LAND
DISPUTE BETWEEN THE UNITED STATES AND MEXICO

_____ DISPLAY PAINTINGS, MURALS AND/ OR SCULPTURE

_____ OTHER (Please specify: _____)

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5. a) Which of the following national park areas along or near the United States-Mexico border have you visited during the past 5 years? Please check (✓) **all** that apply.

Visited in past 5 years?

UNITED STATES

- _____ BIG BEND NATIONAL PARK
- _____ FORT DAVIS NATIONAL HISTORIC SITE
- _____ PALO ALTO BATTLEFIELD NATIONAL HISTORIC SITE
- _____ GUADALUPE MOUNTAINS NATIONAL PARK
- _____ CARLSBAD CAVERNS NATIONAL PARK
- _____ WHITE SANDS NATIONAL MONUMENT
- _____ AMISTAD NATIONAL RECREATION AREA
- _____ ORGAN PIPE CACTUS NATIONAL MONUMENT
- _____ TUMACACORI NATIONAL MONUMENT
- _____ CORONADO NATIONAL MONUMENT

MEXICO

- _____ RESERVA PARA LA PROTECCION DE FLORA Y FAUNA SIERRA DEL CARMEN
- _____ RESERVA PARA LA PROTECCION DE FLORA Y FAUNA CANON DE SANTA ELENA
- _____ EL MONUMENTO NACIONAL DEL CHAMIZAL
- _____ RESERVA DE LA BIOSFERA EL CIELO
- _____ RESERVA DE LA BIOSFERA SIERRA DEL PINACATE Y EL GRAN DESIERTO DE ALTAR

- b) If you were a manager planning for the future of the above United States and Mexico border parks, what would you propose?

6. a) How did you get information about the above national park areas that you have visited? Please check (✓) **all** that apply.

NEWSPAPERS MAGAZINES
 RADIO TELEVISION
 WORD OF MOUTH TRAVEL AGENTS
 PREVIOUS VISITS
 OTHER NATIONAL PARK VISITOR CENTERS
 STATE TOURIST INFORMATION CENTERS
 OTHER (Please describe: _____)

- b) In the future, how would you prefer to get information about national parks along the United States-Mexico border?

7. On this visit, what were your reasons for visiting Chamizal National Memorial? Please check (✓) **all** that apply.

ATTEND A PERFORMANCE (outdoors or indoors)
 VISIT THE VISITOR CENTER/ MUSEUM/ BOOKSTORE
 VISIT LOS PAISANOS GALLERY
 OBTAIN INFORMATION
 USE CHAMIZAL FACILITIES/ GROUNDS (picnic, relax, recreate, exercise)
 OTHER (Please specify: _____)

8. a) Prior to this visit, were you and your group aware of the cooperative programs between border national parks in the United States and Mexico (such as Big Bend National Park and Sierra del Carmen National Park)?

YES NO NOT SURE

- b) If YES, do you have any opinions about the cooperative programs between the United States and Mexico border parks? Please explain.

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You and Your Opinions

9. On this visit, how many people were in your group (including yourself)?

_____ NUMBER OF PEOPLE

10. On this visit, were you with a school/ educational group?

_____ YES _____ NO

11. What kind of group were you with? Please check (✓) only **one**.

_____ ALONE

_____ FAMILY

_____ FRIENDS

_____ FAMILY AND FRIENDS

_____ OTHER (Please describe: _____)

12. For you and your group, please indicate:

	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	NUMBER OF VISITS TO THIS PARK (INCLUDING THIS VISIT)	
			Past year	Past 5 years
YOURSELF	_____	_____	_____	_____
MEMBER 2	_____	_____	_____	_____
MEMBER 3	_____	_____	_____	_____
MEMBER 4	_____	_____	_____	_____
MEMBER 5	_____	_____	_____	_____
MEMBER 6	_____	_____	_____	_____
MEMBER 7	_____	_____	_____	_____

13. a) Please check (√) the services and facilities which you and your group **used** during this visit to Chamizal National Memorial.
- b) Next, for only those services and facilities which you and your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services and facilities which you or your group used, please rate their **quality** from 1-5.

a) Use service/ facility? Check (√)	b) If used, how important?					c) If used, what quality?				
	Not important			Extremely important		Very poor			Very good	
	1	2	3	4	5	1	2	3	4	5
_____ PARK BROCHURE/MAP										
_____ OTHER CHAMIZAL BROCHURES										
_____ INFORMATION FROM PARK EMPLOYEES										
_____ MUSEUM EXHIBITS										
_____ PARK BOOKSTORE SALES ITEMS										
_____ VISITOR CENTER VIDEO PROGRAM										
_____ LOS PAISANOS GALLERY										
_____ RESTROOMS										
_____ FOOD/ BEVERAGE VENDORS										
_____ PARKING										
_____ HIGHWAY DIRECTIONAL SIGNS										
_____ HANDICAPPED ACCESSIBILITY										

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14. a) In the past, has anything discouraged you or members of your group from visiting Chamizal National Memorial?

____ YES ____ NO ____ NOT SURE - GO ON TO
↓ ↘ ↘ **QUESTION 15**

- b) If YES, what were the reasons which discouraged you from visiting Chamizal National Memorial?

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

VERY GOOD GOOD AVERAGE POOR VERY POOR

16. a) Chamizal National Memorial is planning to build a new Performing Arts Arena in the future. Events may include charreada, rodeo, equestrian dressage, music, dance and working dog demonstrations. In the future, would you and your group be likely to attend events at the new Chamizal Performing Arts Arena?

____ YES, LIKELY ____ NO, UNLIKELY ____ NOT SURE
↓ ↘ ↘ **GO ON TO QUESTION 17**

- b) If YES, what is your opinion of the proposed facility?

17. a) What did you and your group like **most** about your visit to Chamizal National Memorial?

- b) What did you and your group like **least** about your visit to Chamizal National Memorial?

- 18. On a future visit, what types of programs/ exhibits/ events would you like to see at Chamizal National Memorial? Please be as specific as possible.

- 19. If you were a manager planning for the future of Chamizal National Memorial, what would you propose? Please be specific.

- 20. Is there anything else that you and your group would like to tell us about your visit to Chamizal National Memorial?

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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