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.
Visiting Chamizal National Memorial

1. Before this visit, how did you and your group get information about Chamizal National Memorial? Please check (v) 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:_______________________________)

PLEASE GO ON TO NEXT PAGE
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

GO ON TO QUESTION 9

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


PLEASE GO ON TO NEXT PAGE
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:

<table>
<thead>
<tr>
<th>CURRENT AGE</th>
<th>U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY</th>
<th>NUMBER OF VISITS TO THIS PARK (INCLUDING THIS VISIT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YOURSELF</td>
<td></td>
<td>Past year: ______ PAST 5 years: ______</td>
</tr>
<tr>
<td>MEMBER 2</td>
<td></td>
<td>Past year: ______ PAST 5 years: ______</td>
</tr>
<tr>
<td>MEMBER 3</td>
<td></td>
<td>Past year: ______ PAST 5 years: ______</td>
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<td>MEMBER 4</td>
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<td>Past year: ______ PAST 5 years: ______</td>
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<td>MEMBER 5</td>
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<td>Past year: ______ PAST 5 years: ______</td>
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<tr>
<td>MEMBER 6</td>
<td></td>
<td>Past year: ______ PAST 5 years: ______</td>
</tr>
<tr>
<td>MEMBER 7</td>
<td></td>
<td>Past year: ______ PAST 5 years: ______</td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>a) Use service/ facility?</th>
<th>b) If used, how important?</th>
<th>c) If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (√)</td>
<td>Not important</td>
<td>Extremely important</td>
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<tr>
<td></td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
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<tr>
<td>_____ PARK BROCHURE/MAP</td>
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<tr>
<td>_____ OTHER CHAMIZAL BROCHURES</td>
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<tr>
<td>_____ INFORMATION FROM PARK EMPLOYEES</td>
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<tr>
<td>_____ MUSEUM EXHIBITS</td>
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<tr>
<td>_____ PARK BOOKSTORE SALES ITEMS</td>
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<tr>
<td>_____ VISITOR CENTER VIDEO PROGRAM</td>
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<tr>
<td>_____ LOS PAISANOS GALLERY</td>
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<tr>
<td>_____ RESTROOMS</td>
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<tr>
<td>_____ FOOD/ BEVERAGE VENDORS</td>
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<tr>
<td>_____ PARKING</td>
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<tr>
<td>_____ HIGHWAY DIRECTIONAL SIGNS</td>
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<td>_____ HANDICAPPED ACCESSIBILITY</td>
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**PLEASE GO ON TO NEXT PAGE**
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

   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?

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

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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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Cooperative Park Studies Unit
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College of Forestry, Wildlife and
Range Sciences
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