

Bryce Canyon National Park Visitor Study



**The
Visitor Services
Project**

Superintendent letter to go here

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 authorizes 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.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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 Office of Information and Regulatory Affairs of OMB, Attention Desk Officer for the Interior Department, Office of Management and Budget, Washington, D.C. 20503; and to the Information Collection Clearance Officer, Audits and Accountability Team, National Park Service, P.O. Box 37127, Washington, D.C. 20013-7127.

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VISITING BRYCE CANYON NATIONAL PARK

1. Prior to your visit, how did you and your group get information about Bryce Canyon National Park? Please check (✓) **all** that apply.

- _____ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**
- _____ TRAVEL GUIDE/TOUR BOOK
- _____ NEWSPAPER/MAGAZINE ARTICLES
- _____ MAPS
- _____ FRIENDS OR RELATIVES
- _____ PREVIOUS VISIT(S)
- _____ TELEPHONE INQUIRY TO THE PARK
- _____ WRITTEN INQUIRY TO THE PARK
- _____ HIGHWAY SIGNS
- _____ INTERNET/WORLD WIDE WEB
- _____ E-MAIL TO THE PARK
- _____ TRAVEL AGENT
- _____ CONCESSION RESERVATIONS OFFICE
- _____ OTHER (Please specify: _____)

2. a) Where did you and your group spend the night **before you arrived** at Bryce Canyon National Park?

_____ NEAREST TOWN

_____ STATE

- b) Where do you and your group plan to spend the night **when you leave** Bryce Canyon National Park?

_____ NEAREST TOWN

_____ STATE

3. a) On this trip, how much time did you and your group spend outside the park but in the Bryce Canyon National Park **area** (within 50 miles of the park, including Panguitch, Escalante, Tropic, etc.)?

If **less** than 24 hours: _____ NUMBER OF HOURS

If 24 hours or **more**: _____ NUMBER OF DAYS
(Please list partial days as 1/4, 1/2, etc.)

- b) On this trip, how much time did you and your group spend **in** Bryce Canyon National Park?

If **less** than 24 hours: _____ NUMBER OF HOURS

If 24 hours or **more**: _____ NUMBER OF DAYS
(Please list partial days as 1/4, 1/2, etc.)

4. On the list below, please check (✓) **all** of the activities that you and your group participated in during this trip to Bryce Canyon National Park.

_____ CAMP AT DEVELOPED CAMPGROUND

_____ CAMP AT BACKCOUNTRY CAMPSITE

_____ VISIT VISITOR CENTER

_____ PURCHASED ITEMS AT VISITOR CENTER

_____ VISIT LODGE

_____ AUTO TOUR WITH ONLY SHORT WALKS TO VIEWPOINTS

_____ HIKE

_____ ATTEND RANGER/VOLUNTEER-LED ACTIVITY
(Interpretive talks, guided walks, etc.)

_____ HORSEBACK RIDE

_____ BICYCLE

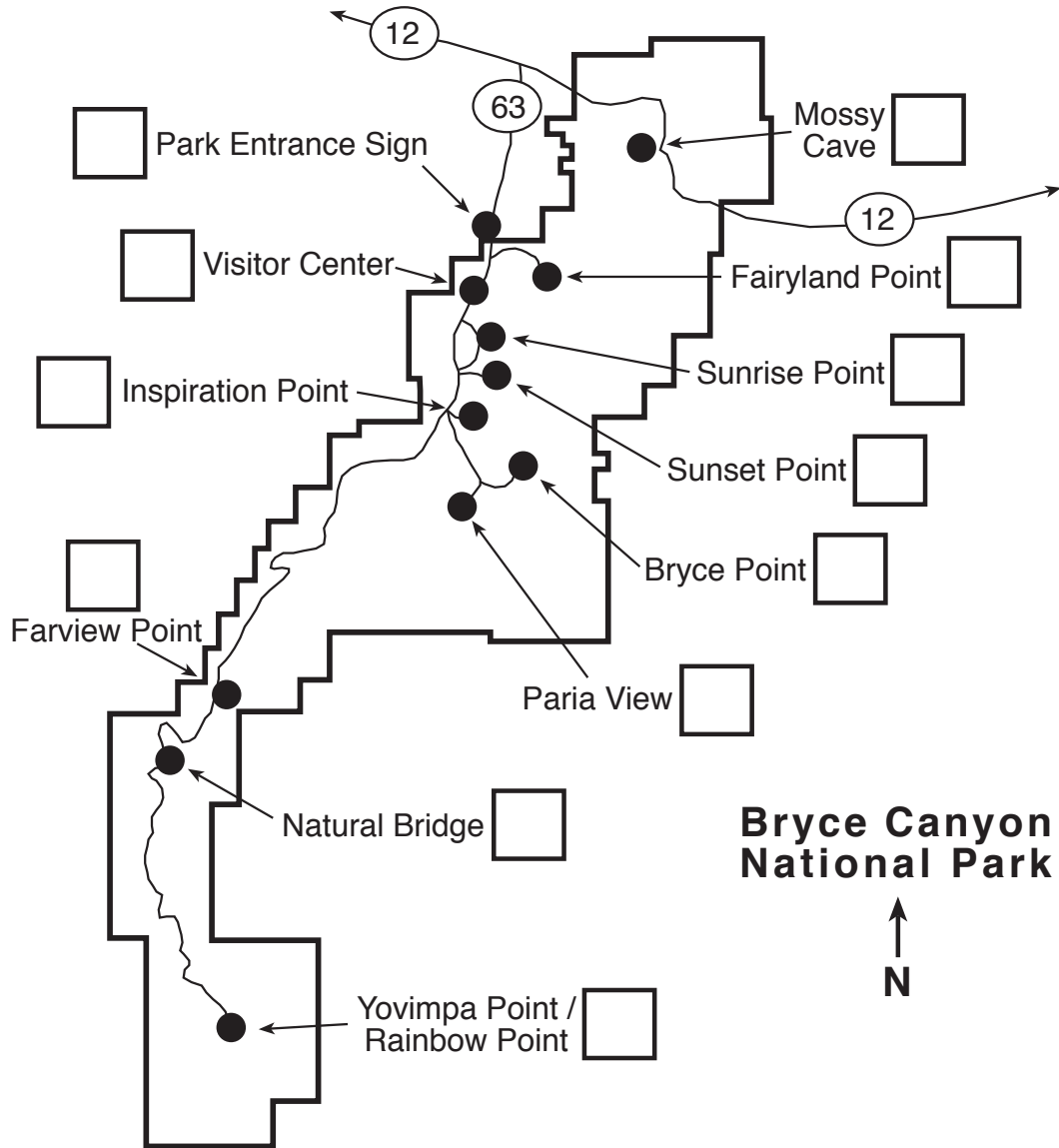
_____ OTHER (Please describe: _____)

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5. On the map below, please mark the order in which you and your group visited sites at Bryce Canyon National Park **during this visit**. Simply write 1 (for first site visited), 2 (for second site visited), and so forth in the boxes beside the sites on the map. If you did not visit a site, please leave the box blank.



6. On this visit, did you and your group hike at Bryce Canyon National Park?

_____ YES _____ NO - **GO ON TO QUESTION 7**

└
If YES, please indicate what type of hiking you participated in. Please check
(√) **all** that apply.

_____HIKED ABOVE CANYON RIM

_____HIKED INTO CANYON BELOW THE RIM

_____TOOK HIKE THAT WAS SHORTER THAN 2 HOURS

_____TOOK HIKE THAT WAS FROM 2 TO 4 HOURS LONG

_____TOOK HIKE THAT WAS LONGER THAN 4 HOURS

YOU AND YOUR OPINIONS

7. On this visit, how many people were in your **immediate** group, including yourself?

_____ NUMBER OF PEOPLE

8. a) On this visit, were you with a guided tour group?

_____ YES _____ NO - **GO ON TO QUESTION 9**

b) └ If YES, how many people were in the guided tour group?

_____ NUMBER OF PEOPLE

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

_____ALONE

_____FAMILY

_____FRIENDS

_____FAMILY AND FRIENDS

_____OTHER (Please describe:_____)

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10. For you and each member of your group on this visit, please indicate:

	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	NUMBER OF VISITS MADE TO THIS PARK (INCLUDING THIS VISIT)	
			PAST 12 MONTHS	PAST 5 YEARS
YOURSELF	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____

11. a) When you and your group visit national parks, do you ever attend ranger/volunteer-led activities (i.e. guided walks and/or talks)?

_____ NO, NEVER - **GO ON TO QUESTION 12**

_____ YES, AT LEAST OCCASIONALLY

[
b) If YES, please indicate your preferred times to attend such activities at Bryce Canyon National Park. Please suggest **two** time periods by writing in the hours and circling AM or PM.

From _____ AM or PM To _____ AM or PM

From _____ AM or PM To _____ AM or PM

12. Bryce Canyon National Park programs and exhibits address a variety of subjects. What subjects would you like to learn about on a future visit to the park?

13. a) Please check (✓) the information services which you or your group **used** at Bryce Canyon National Park during this visit.
- b) Next, for only those services which you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services which you or your group used, please rate their **quality** from 1-5.

a) Used service in Bryce Canyon NP?	b) If used, how important?					c) If used, what quality?				
	Not important					Extremely important		Very poor		Very good
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ PARK BROCHURE/MAP										
_____ PARK NEWSPAPER (<i>Hoodoo</i>)										
_____ VISITOR CENTER STAFF										
_____ VISITOR CENTER SALES PUBLICATIONS										
_____ VISITOR CENTER EXHIBITS										
_____ VISITOR CENTER SLIDE SHOW										
_____ RANGER/VOLUNTEER-LED PROGRAMS										
_____ SELF-GUIDED NATURE TRAILS										
_____ ROADSIDE EXHIBITS										
_____ BULLETIN BOARDS										
_____ SAFETY INFORMATION BROCHURES										
_____ OTHER INFORMATIONAL BROCHURES										
_____ EMERGENCY SERVICES										
_____ JUNIOR RANGER PROGRAM										
_____ PARK RADIO STATION - 1610 AM (Near park entrance)										

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15. a) Which of the following park qualities were **reasons** for this visit to Bryce Canyon National Park? Please check (✓) **all** that apply.
- b) Next, for only those park qualities that you indicated were reasons for this visit, please rate their relative **importance** from 1-5.
- c) Finally, for only those park qualities that you indicated were reasons for this visit, please rate how **satisfied** you were from 1-5.

a) Reason for visiting Bryce Canyon NP?	b) How important?					c) How satisfied?				
	Not important		Extremely important			Not satisfied		Extremely satisfied		
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ SCENERY										
_____ RECREATION OPPORTUNITIES IN PARK (hiking, photography, bicycling, etc.)										
_____ OTHER RECREATION OPPORTUNITIES IN AREA										
_____ EDUCATIONAL OPPORTUNITIES										
_____ SOLITUDE										
_____ QUIET										
_____ WILDERNESS ENVIRONMENT/ OPEN SPACE										
_____ BACKCOUNTRY CAMPING										
_____ VIEW WILDLIFE										
_____ VISIBILITY (distance and clarity of view)										

16. Did anything detract from your enjoyment of any of the above features or qualities?

_____ YES _____ NO - **GO ON TO QUESTION 17**

└
If YES, how? Please explain: _____

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17. For you and all the **adults** in your group on this visit, please indicate the current income level. Please circle only **one** for each person.

CURRENT INCOME LEVEL					
	LESS THAN \$10,000	\$10,001- \$20,000	\$20,001- \$30,000	\$30,001- \$40,000	\$40,001 OR MORE
YOURSELF	1	2	3	4	5
ADULT #2	1	2	3	4	5
ADULT #3	1	2	3	4	5
ADULT #4	1	2	3	4	5
ADULT #5	1	2	3	4	5
ADULT #6	1	2	3	4	5
ADULT #7	1	2	3	4	5

18. For you and all the **adults** in your group on this visit, please indicate the highest level of education received. Please circle only **one** for each person.

HIGHEST LEVEL OF EDUCATION				
	SOME HS	HS GRAD	BACHELOR DEGREE	GRADUATE DEGREE
YOURSELF	1	2	3	4
ADULT #2	1	2	3	4
ADULT #3	1	2	3	4
ADULT #4	1	2	3	4
ADULT #5	1	2	3	4
ADULT #6	1	2	3	4
ADULT #7	1	2	3	4

19. a) Please list below the subject matter that you would most like to have available for purchase in the visitor center bookstore on a future visit to Bryce Canyon National Park.

- b) Please list below the types of items (e.g. books, video tapes, etc.) that you would most like to have available for purchase in the visitor center bookstore on a future visit to Bryce Canyon National Park.

20. a) On the list below, please indicate each of the fees you or a member of your group paid **in** Bryce Canyon National Park during this visit. Please check (✓) **all** that apply.
- b) Next, for only those fees that you paid, please indicate how appropriate you felt the amount of the fee was.

a) Check (✓) fees paid	b) How appropriate?		
	Too high	About right	Too low
_____ ENTRY BY PASS (Golden Eagle/Age/Access Pass or Annual Park Pass)	1	2	3
_____ 7-DAY ENTRANCE FEE	1	2	3
_____ DISCOUNT CAMPING FEE (using Golden Age Pass or Golden Access Pass)	1	2	3
_____ CAMPING FEE (individual site)	1	2	3
_____ GROUP CAMPING FEE	1	2	3
_____ DUMP STATION FEE	1	2	3
_____ BACKCOUNTRY PERMIT FEE	1	2	3

21. If it would increase funds to operate Bryce Canyon National Park, would you be willing to pay modest fees for the following services? These fees would **NOT** be included in the normal park entrance fee. For each type of fee listed below, please circle YES or NO to indicate your willingness to pay the fee. If willing to pay the fee, please circle the **one** price range that you feel is most appropriate.

Type of fee	Willing to pay?	Appropriate amount?		
INTERPRETIVE RANGER PROGRAM FEE (per person)	YES / NO	\$1-3	\$4-6	\$7-10
SHUTTLE BUS SERVICE FEE (per person)	YES / NO	\$1-3	\$4-6	\$7-10
PRIVATE VEHICLE PARKING FEE (per vehicle)	YES / NO	\$1-3	\$4-6	\$7-10

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22. During this trip, how much money did you and your group spend in Bryce Canyon National Park and in the Bryce Canyon National Park **area** (within 50 miles of the park including Panguitch, Escalante, Tropic, etc.)? Please write "0" if your group did not spend any money.

Local residents should only include expenditures that were **directly related** to this visit to the park.

\$_____ LODGING (motel, campsite, etc.)

\$_____ TRAVEL (gas, bus fare, etc.)

\$_____ FOOD (restaurant, groceries, etc.)

\$_____ OTHER (recreation, film, gifts, etc.)

23. a) During this visit to Bryce Canyon National Park, did you and your group feel crowded by **either** people or vehicles?

_____ YES _____ NO - **GO ON TO QUESTION 24**

- b) If YES, please use the scale below to rate (from 1 to 5) how crowded you and your group felt by people or vehicles during this visit.

How crowded?	<u>Not at all crowded</u>			<u>Extremely crowded</u>	
PEOPLE	1	2	3	4	5
VEHICLES	1	2	3	4	5

- c) Where in Bryce Canyon National Park were you when you felt crowded? Please be as specific as possible.

- d) What time of day was it when you felt crowded? Please circle **all** that apply.

MORNING
(Before noon)

AFTERNOON
(Noon-6pm)

EVENING
(After 6pm)

24. If the number of passenger vehicles entering Bryce Canyon National Park in the future must be limited due to vehicle congestion, which of the following alternatives for entering the park would you find most acceptable? Please check (✓) only **one**.

_____ FIRST COME, FIRST SERVED UNTIL A DAILY LIMIT IS REACHED

_____ USE A RESERVATION SYSTEM

_____ USE A SHUTTLE SYSTEM

_____ OTHER (Please specify:_____)

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

VERY GOOD GOOD AVERAGE POOR VERY POOR

26. If you were a manager planning for the future of Bryce Canyon National Park, what would you propose? Please be specific.

27. Is there anything else you and your group would like to tell us about your visit to Bryce Canyon National Park?

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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