

# Lassen Volcanic National Park Visitor Study



The  
Visitor Services  
Project

**United States Department of the Interior****NATIONAL PARK SERVICE**

Lassen Volcanic National Park  
P.O. Box 100  
Mineral, CA 96020

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Lassen Volcanic National Park. This will assist us in our efforts to better manage this site and to serve you, the visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take a few minutes during or after your visit.

When your visit is over, please complete the questionnaire. Seal it with the sticker provided on the last page and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, VSP Coordinator, Cooperative Park Studies Unit, College of Forestry, Wildlife and Range Sciences, University of Idaho, Moscow, Idaho 83844-1133.

We appreciate your help.

Sincerely,

/s/

Marilyn H. Parris  
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.

**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, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20013-7127.

**PLEASE GO ON TO NEXT PAGE**



## YOUR VISIT TO LASSEN VOLCANIC NATIONAL PARK

1. a) **Prior to this trip**, how did you and your group obtain information about Lassen Volcanic National Park? Please check ( ) **all** that apply.
- b) On future trips to Lassen Volcanic National Park, what sources would you and your group prefer to use to obtain information in planning your visit?
- \_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**

**Prior to this visit?**

**Prior to future visits?**

- |   |       |
|---|-------|
| _____ PREVIOUS VISIT(S)   | _____ |
| _____ FRIENDS/ RELATIVES  | _____ |
| _____ TRAVEL GUIDE/ TOUR BOOK   | _____ |
| _____ LOCAL BUSINESSES  | _____ |
| _____ TELEVISION/ RADIO PROGRAMS  | _____ |
| _____ TELEPHONE INQUIRY TO PARK   | _____ |
| _____ WRITTEN INQUIRY TO PARK   | _____ |
| _____ NEWSPAPER/ MAGAZINE ARTICLES  | _____ |
| _____ INTERNET/ WEB SITE ( <a href="http://www.nps.gov/lavo">www.nps.gov/lavo</a> ) | _____ |
| _____ CHAMBER OF COMMERCE   | _____ |
| _____ VISITORS BUREAU   | _____ |
| _____ OTHER<br>(Please specify: _____)  | _____ |

2. How did this visit to Lassen Volcanic National Park fit into your travel plans? Please check ( ) **only one**.

- \_\_\_\_\_ LASSEN VOLCANIC NP WAS THE PRIMARY DESTINATION
- \_\_\_\_\_ LASSEN VOLCANIC NP WAS ONE OF SEVERAL DESTINATIONS
- \_\_\_\_\_ LASSEN VOLCANIC NP WAS NOT A PLANNED DESTINATION



6. During this trip, how much time did you and your group spend at Lassen Volcanic 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.)

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

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

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

\_\_\_\_\_ YES \_\_\_\_\_ NO

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

\_\_\_\_\_ ALONE

\_\_\_\_\_ FAMILY

\_\_\_\_\_ FRIENDS

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

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

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

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

11. For each of the following features or qualities of Lassen Volcanic National Park, please rate its importance (from 1 to 5, or 0 for "don't know") to you and your group. Please circle **one** answer for each feature or quality.

<b>How important?</b>	Not important	Somewhat important	Extremely important	Don't know		
SCENIC VIEWS	1	2	3	4	5	0
NATURAL FEATURES (volcanic, plants, animals, etc.)	1	2	3	4	5	0
RECREATIONAL OPPORTUNITIES (hiking, camping, fishing, etc.)	1	2	3	4	5	0
EDUCATIONAL OPPORTUNITIES	1	2	3	4	5	0
SOLITUDE/ QUIET	1	2	3	4	5	0
WILDERNESS	1	2	3	4	5	0
HISTORIC FEATURES	1	2	3	4	5	0

12. a) On this visit, what did you and your group like **most** about the roadside exhibits along the main park road at Lassen Volcanic National Park?

---



---



---

- b) On this visit, what did you and your group like **least** about the roadside exhibits along the main park road at Lassen Volcanic National Park?

---



---



---

PLEASE GO ON TO NEXT PAGE 

**8**

See Section 2 of the this questionnaire for pages 8 and 9. Layout is horizontal for map.



Park map

PLEASE GO ON TO NEXT PAGE 

14. a) Please check ( ) the information services which you or your group **used** during this trip to Lassen Volcanic National Park.
- 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.

Use information service? quality?	If used, how important?					If used, what				
	Not important		Extremely important			Very poor		Very good		
	1	2	3	4	5	1	2	3	4	5
_____ PARK BROCHURE/ MAP										
_____ PARK NEWSPAPER: <i>Peak Experiences</i>										
_____ BULLETIN BOARDS										
_____ LOOMIS MUSEUM EXHIBITS										
_____ LOOMIS MUSEUM STAFF										
_____ ASSISTANCE FROM PARK STAFF										
_____ RANGER-LED PROGRAMS (walks, talks, campfire programs)										
_____ SELF-GUIDING TRAIL BROCHURES										
_____ ROAD GUIDE BOOKLET										
_____ SALES PUBLICATIONS										

15. a) In some national parks, the National Park Service follows a prescribed burn policy. This policy involves setting fires under specific weather and fire conditions to reduce the buildup of undergrowth and help prevent catastrophic fires. Prior to this visit to Lassen Volcanic National Park, were you aware of this burn policy?

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

- b) Are you and your group willing to tolerate short periods (up to 2 days) of smoke or reduced visibility during your visit to Lassen Volcanic National Park?

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

16. a) Please check ( ) the visitor services and facilities which you or your group **used** during this trip to Lassen Volcanic National Park.
- b) Next, for only those services and facilities which you or 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.

Use service/ facility?  Check (√)	If used, how important?					If used, what quality?				
	Not important		Extremely important			Very poor		Very good		
	1	2	3	4	5	1	2	3	4	5
_____ ROAD DIRECTIONAL SIGNS						_____				
_____ ROADS						_____				
_____ PARKING LOTS						_____				
_____ PULL OUTS						_____				
_____ RESTROOMS						_____				
_____ TRAILS						_____				
_____ TRAIL SIGNS						_____				
_____ CAMPGROUNDS						_____				
_____ PICNIC AREAS						_____				
_____ HANDICAPPED ACCESS						_____				
_____ GUEST RANCH						_____				
_____ CAMPER STORE						_____				
_____ CHALET						_____				

PLEASE GO ON TO NEXT PAGE



17. a) Please check ( ) the concession services and facilities which you or your group **used** during this trip to Lassen Volcanic National Park.  
 b) Next, for only those services and facilities which you or your group used, please rate their **quality** from 1-5.

Use service/ facility?  Check (√)	If used, what quality?				
	Very poor 1	2	3	4	Very good 5
<u>Drakesbad Guest Ranch</u>					
_____ OVERNIGHT LODGING					_____
_____ FOOD SERVICE - RESTAURANT					_____
_____ GUIDED HORSEBACK TRIPS					_____
_____ FLY FISHING LESSONS					_____
<u>Manzanita Lake Camper Store</u>					
_____ FOOD SERVICE					_____
_____ GIFTS/ GAS STATION					_____
_____ EQUIPMENT RENTALS					_____
<u>Chalet in Southwest area</u>					
_____ FOOD SERVICE					_____
_____ GIFTS					_____

- c) How could the concession services and facilities better serve you and your group on a future visit to Lassen Volcanic National Park? Please be specific.

\_\_\_\_\_

\_\_\_\_\_

18. During this trip, how much money (for lodging, travel, food, and other items) did you and your group spend in the **area** of Lassen Volcanic National Park (within 50 miles of the park including Redding, Red Bluff, Chico, Susanville and Burney)? Please write "0" if you and your group did not spend any money.

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

	Money spent within 50 miles of Lassen Volcanic NP
LODGING (hotel, motel, campsite, etc.)	\$ _____
TRAVEL (gas, bus fare, etc.)	\$ _____
FOOD (restaurant, groceries, etc.)	\$ _____
OTHER (recreation, film, gifts, etc.)	\$ _____

19. a) During this visit to Lassen Volcanic National Park, please check the places you and your group visited on the following list.
- b) Next, rate how crowded (from 1-4 or 0=don't remember) you and your group felt by the number of **people** in each of these locations during this visit.
- c) Finally, rate how crowded (from 1-4 or 0=don't remember) you and your group felt by the number of **vehicles** in each of these locations during this visit.

1= NOT AT ALL CROWDED  
 2=SLIGHTLY CROWDED  
 3=MODERATELY CROWDED  
 4=EXTREMELY CROWDED  
 0=DON'T REMEMBER

Visit? (✓)	If visited, how crowded? (people)					If visited, how crowded? (vehicles)				
	1	2	3	4	0	1	2	3	4	0
_____ CAMPGROUNDS										
_____ LOOMIS MUSEUM										
_____ LASSEN PEAK TRAIL										
_____ BUMPASS HELL TRAIL										
_____ KING'S CREEK AREA										
_____ WARNER VALLEY/ GUEST RANCH										
_____ OTHER (Please specify: _____)										

20. On a future visit, which of the following sources of information would you prefer to use when learning about Lassen Volcanic National Park? Please check ( ) **all** that apply.

- \_\_\_\_\_ PARK BROCHURES/ MAPS
- \_\_\_\_\_ OTHER BROCHURES/ MAPS (other than park brochures/ maps)
- \_\_\_\_\_ TRAVEL GUIDE/ TOUR BOOK
- \_\_\_\_\_ PARK STAFF
- \_\_\_\_\_ PARK EXHIBITS
- \_\_\_\_\_ INTERACTIVE COMPUTER IN LASSEN NP (with ability to print)
- \_\_\_\_\_ INTERACTIVE COMPUTER IN LOCATIONS OUTSIDE LASSEN NP (with ability to print)
- \_\_\_\_\_ INTERNET/ WEBSITE
- \_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

PLEASE GO ON TO NEXT PAGE



21. On a future visit, how would you prefer to learn about the cultural and natural history of Lassen Volcanic National Park? Please check ( ) **all** that apply.
- \_\_\_\_ NOT INTERESTED IN LEARNING ABOUT PARK - **GO ON TO QUESTION 23**
- \_\_\_\_ VISITOR CENTER EXHIBITS
- \_\_\_\_ ROADSIDE EXHIBITS
- \_\_\_\_ TRAILSIDE EXHIBITS
- \_\_\_\_ PRINTED MATERIALS (brochures, books, maps, etc.)
- \_\_\_\_ AUDIOVISUAL (videos, movies, slide shows, etc.)
- \_\_\_\_ INTERACTIVE COMPUTER
- \_\_\_\_ RANGER-LED WALKS/ TOURS
- \_\_\_\_ HISTORICAL RE-ENACTMENTS
- \_\_\_\_ ROVING RANGERS
- \_\_\_\_ VISITOR OR INFORMATION STATION PERSONNEL
- \_\_\_\_ INTERNET/ WEBSITE
- \_\_\_\_ OTHER (Please specify: \_\_\_\_\_)
22. On a future visit to Lassen Volcanic National Park, what subjects would you and your group be most interested in learning about? Please check ( ) **all** that apply.
- \_\_\_\_ NONE - - **GO ON TO QUESTION 23**
- \_\_\_\_ VOLCANOES/ GEOLOGY
- \_\_\_\_ HISTORY
- \_\_\_\_ NATURAL HISTORY/ NATURE STUDY
- \_\_\_\_ PRESCRIBED FIRE/ FIRE MANAGEMENT
- \_\_\_\_ WILDERNESS MANAGEMENT
- \_\_\_\_ ENVIRONMENTAL ECOLOGY
- \_\_\_\_ NATIONAL PARK SYSTEM
- \_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

23. If you were a manager planning for the future of Lassen Volcanic National Park, what would you propose? Consider both WINTER AND SUMMER issues in your answer. Please be specific.

---

---

---

---

---

---

---

24. Is there anything else you and your group would like to tell us about your visit to Lassen Volcanic National Park?

---

---

---

---

---

---

---

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

VERY GOOD      GOOD      AVERAGE      POOR      VERY POOR

Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox.



Printed on recycled paper

**OFFICIAL BUSINESS**

**Visitor Services Project  
Cooperative Park Studies Unit  
Department of Forest Resources  
College of Forestry, Wildlife and  
Range Sciences  
University of Idaho  
Moscow, Idaho 83844-1133**