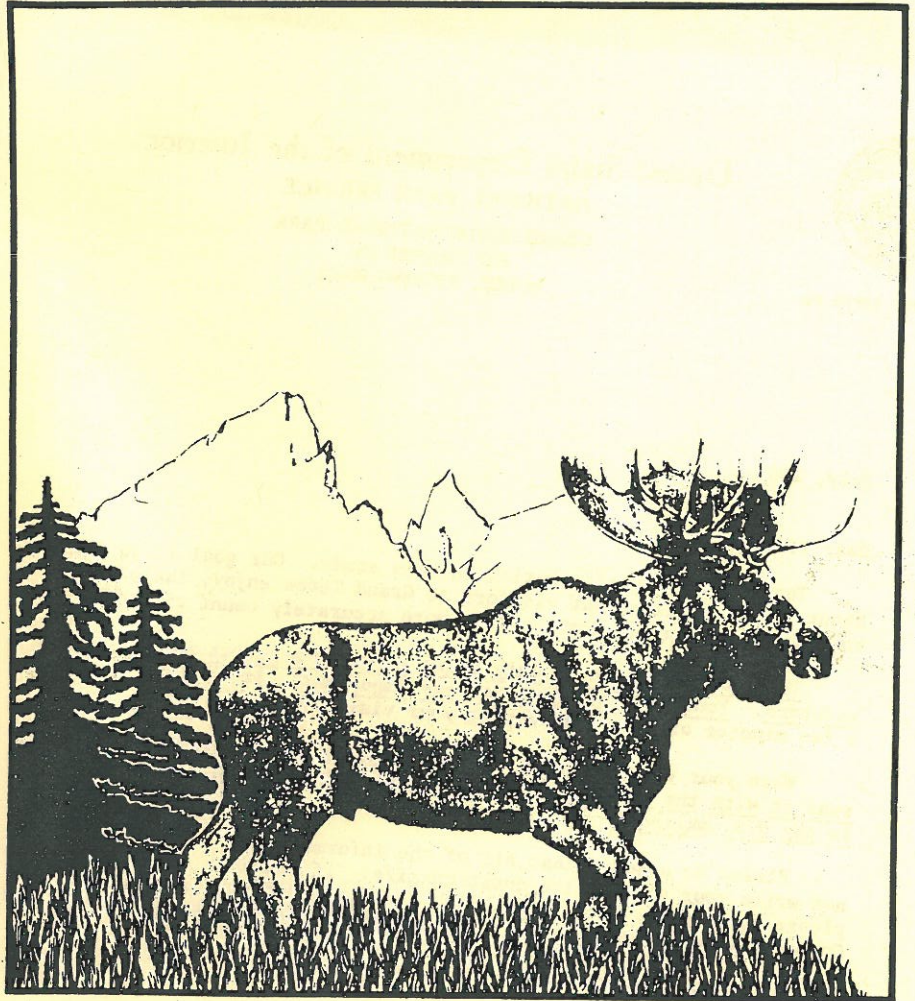


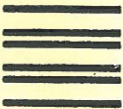
Grand Teton Visitor Study

1987
11



The Visitor Services Project

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NATIONAL PARK SERVICE

OFFICIAL BUSINESS

Cooperative Park Studies Unit
College of Forestry, Wildlife, and Range
Sciences
University of Idaho
Moscow, Idaho 83843

IMPORTANT

When did you first enter Grand Teton National Park this visit?

_____ DAY OF THE WEEK (M,T,W,Th,F,S,Su)

_____ TIME OF DAY _____ am. _____ pm.

DIRECTIONS

One person 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. No postage is needed.

This questionnaire asks about your location and activities on the first two days of your visit.

PLEASE GO ON TO NEXT PAGE



United States Department of the Interior

NATIONAL PARK SERVICE

GRAND TETON NATIONAL PARK

P.O. DRAWER 170

MOOSE, WYOMING 83012

REPLY REFER TO:

July, 1987

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the activities that visitors to Grand Teton enjoy, the places they visit within the park, and to more accurately count visitors.

This questionnaire is only being given to a select number of visitors. Your participation is very important! It should only take a few minutes of your time during your visit to Grand Teton.

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

Please be assured that all of the information is confidential. Do not write your name on the questionnaire. If you have any questions, please contact Dr. Gary E. Machlis, Sociology Project Leader, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83843.

We appreciate your help.

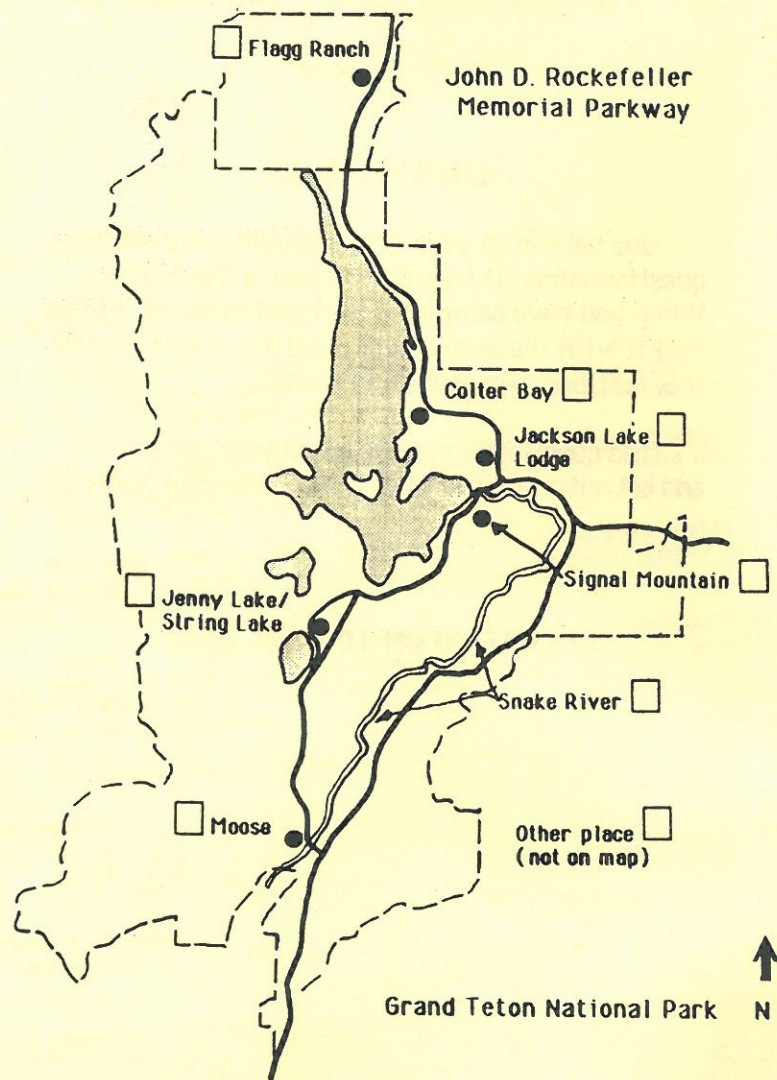
Sincerely,

Jack E. Stark

Jack E. Stark,
Superintendent

4 DAY 1 OF YOUR VISIT

1. For day 1 of your visit, please check (✓) the box on the map below beside the place where you began the day.
2. Next, indicate the order in which you visited places in Grand Teton National Park during this day by writing 1st, 2nd, 3rd, and so forth in the box beside each place you visited.



DAY 1 OF YOUR VISIT

5

3. On the list below, please check (✓) the activities that you or you group did in Grand Teton National Park on day 1 of your visit. (Please check all that apply)

- | | |
|--------------------------------------|--|
| _____ HIKE FOR LESS THAN 2 HOURS | _____ HIKE FOR MORE THAN 2 HOURS |
| _____ FLOAT RIVER | _____ SHOP |
| _____ FISH | _____ RIDE HORSEBACK |
| _____ BOAT ON LAKE | _____ BICYCLE |
| _____ PICNIC | _____ TECHNICAL CLIMB |
| _____ VISIT VISITOR CENTER | _____ ATTEND RANGER-LEAD ACTIVITY (walk, etc.) |
| _____ ATTEND EVENING PROGRAM | _____ STOP AT ROADSIDE EXHIBITS |
| _____ OTHER (Please describe: _____) | |

4. Did you spend the night in the Grand Teton area?

_____ NO → **PLEASE GO ON TO PAGE 8**

_____ YES

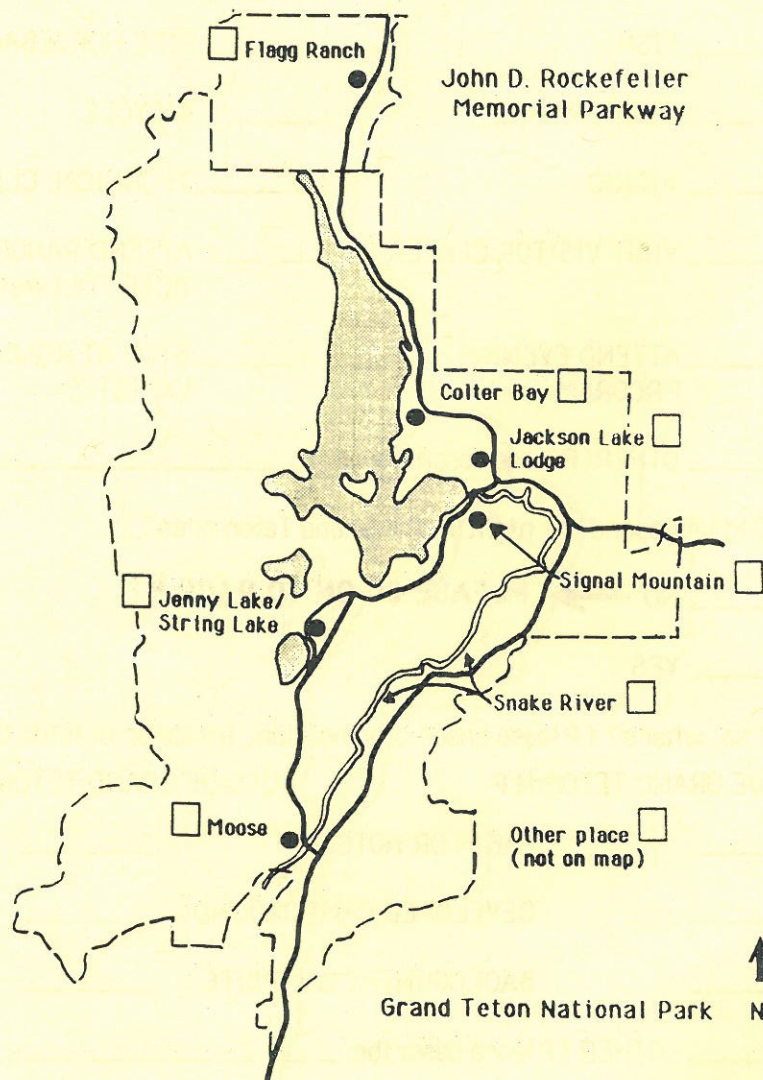
↓ If so, where? (Please check one location, inside or outside the park)

INSIDE GRAND TETON N.P.	OUTSIDE GRAND TETON N.P.
-------------------------	--------------------------

- | | |
|--------------------------------------|-------|
| _____ CABIN OR HOTEL | _____ |
| _____ DEVELOPED CAMPGROUND | _____ |
| _____ BACKCOUNTRY CAMPSITE | _____ |
| _____ OTHER (Please describe: _____) | |

PLEASE GO ON TO DAY 2, NEXT PAGE

- For day **2** of your visit, please check (✓) the box on the map below beside the place where you began the day.
- Next, indicate the order in which you visited places in Grand Teton National Park during this day by writing 1st, 2nd, 3rd, and so forth in the box beside each place you visited.



- On the list below, please check (✓) the activities that you or your group did in Grand Teton National Park on day **2** of your visit. (Please check all that apply)

- | | |
|--------------------------------------|---|
| _____ HIKE FOR LESS THAN 2 HOURS | _____ HIKE FOR MORE THAN 2 HOURS |
| _____ FLOAT RIVER | _____ SHOP |
| _____ FISH | _____ RIDE HORSEBACK |
| _____ BOAT ON LAKE | _____ BICYCLE |
| _____ PICNIC | _____ TECHNICAL CLIMB |
| _____ VISIT VISITOR CENTER | _____ ATTEND RANGER-LED ACTIVITY (walk, etc.) |
| _____ ATTEND EVENING PROGRAM | _____ STOP AT ROADSIDE EXHIBITS |
| _____ OTHER (Please describe: _____) | |

- Did you spend the night in the Grand Teton area?

_____ NO → **PLEASE GO ON TO PAGE 8**

_____ YES

- ↓ If so, where? (Please check one location, inside or outside the park)
- | | |
|-------------------------------|--------------------------------|
| _____ INSIDE GRAND TETON N.P. | _____ OUTSIDE GRAND TETON N.P. |
|-------------------------------|--------------------------------|

- | | |
|--------------------------------------|-------|
| _____ CABIN OR HOTEL | _____ |
| _____ DEVELOPED CAMPGROUND | _____ |
| _____ BACKCOUNTRY CAMPSITE | _____ |
| _____ OTHER (Please describe: _____) | |

EVEN IF YOU STAYED IN GRAND TETON NATIONAL PARK MORE THAN 2 DAYS, PLEASE GO ON TO PAGE 8

YOU AND YOUR OPINIONS

We hope you enjoyed your visit to Grand Teton National Park. Below are several questions that will help us learn about the people who participated in the study and their thoughts about the park.

1. How many days did you spend in Grand Teton National Park this visit?

_____ NUMBER OF DAYS

2. How many people were in your group?

_____ NUMBER OF PEOPLE

3. What kind of group were you with?

_____ ALONE

_____ FAMILY

_____ FRIENDS

_____ FAMILY AND FRIENDS

_____ GUIDED TOUR GROUP

_____ OTHER GROUP (please describe: _____)

4. For yourself and each member of your group, please indicate:

1) each person's age on their last birthday

2) the zip code of their permanent residence (if from a country other than the United States, please give the name of that country), and

3) the number of times they have visited Grand Teton National Park, including this visit.

	AGE	ZIP CODE (country)	# TIMES VISITED
YOURSELF	_____	_____	_____
MEMBER #2	_____	_____	_____
MEMBER #3	_____	_____	_____
MEMBER #4	_____	_____	_____
MEMBER #5	_____	_____	_____
additional members:	_____		

PLEASE GO ON TO NEXT PAGE

5. a. During this visit did you use any of the following information or interpretive services at Grand Teton National Park? (Please check all that you used.)
- b. How useful were the services you used? (Please mark each service you used from 1 to 5 (1=EXTREMELY USEFUL, 2=VERY USEFUL, 3=MODERATELY USEFUL, 4=SOMEWHAT USEFUL, 5=NOT USEFUL) in the column on the right.)

Use service? (✓)

Rating? (#)

_____	WALK OR TOUR GIVEN BY A RANGER	_____
_____	SELF-GUIDED TRAIL BROCHURES	_____
_____	AUDIO-VISUAL PROGRAMS	_____
_____	PARK MAP/BROCHURE	_____
_____	PARK NEWSPAPER (TEEWINOT)	_____
_____	EVENING CAMPFIRE PROGRAMS	_____
_____	ROADSIDE EXHIBITS	_____
_____	VISITOR CENTERS	_____
_____	MUSEUMS	_____
_____	PARK DIRECTION SIGNS	_____
_____	BULLETIN BOARDS	_____
_____	SAFETY BROCHURES OR HANDOUTS	_____

6. Many things contribute to an enjoyable visit to Grand Teton. Please do the following:
- a) First, indicate the importance of each of the following items to you and your group (1=EXTREMELY IMPORTANT, 2=VERY IMPORTANT, 3=MODERATELY IMPORTANT, 4=SOMEWHAT IMPORTANT, 5=NOT IMPORTANT).
- b) Then, rate the quality of each item you or your group used during this visit to Grand Teton (1=VERY GOOD, 2=GOOD, 3=AVERAGE, 4=POOR, 5=VERY POOR).

How important?

What quality?

_____	OVERNIGHT LODGING	_____
_____	FOOD SERVICE	_____
_____	FLOAT TRIPS	_____
_____	HORSE RIDES/TRIPS	_____
_____	AIR TRANSPORTATION	_____
_____	NUMBER AND VARIETY OF STORES	_____
_____	MEDICAL SERVICES	_____
_____	AUTOMOTIVE SERVICES	_____

PLEASE GO ON TO NEXT PAGE

7. During this visit to Grand Teton National Park, did you and your group stop at the Jenny Lake/String Lake area?

____ YES

____ NO

If so, please check your Jenny Lake/ String Lake activities on the list below (Please check all that apply).

____ TAKE SCENIC DRIVE

____ PICNIC

____ HIKE FOR LESS THAN 2 HOURS

____ HIKE FOR MORE THAN 2 HOURS

____ TECHNICAL CLIMB

____ RIDE HORSEBACK

____ CAMP IN CAMPGROUND

____ BICYCLE

____ TAKE EXCURSION BOAT RIDE

____ BOAT (OTHER THAN EXCURSION)

____ OTHER (Please describe: _____)

_____)

PLEASE GO ON TO NEXT PAGE

8. During this visit to Grand Teton National Park, did you and your group stop at Colter Bay?

____ YES

____ NO

If so, please check your Colter Bay activities on the list below (Please check all that apply).

____ VISIT VISITOR CENTER

____ PICNIC

____ HIKE FOR LESS THAN 2 HOURS

____ HIKE FOR MORE THAN 2 HOURS

____ RIDE HORSEBACK

____ CAMP IN CAMPGROUND

____ BICYCLE

____ TAKE EXCURSION BOAT RIDE

____ BOAT (OTHER THAN EXCURSION)

____ OTHER (Please describe: _____)

_____)

PLEASE GO ON TO NEXT PAGE

9. If you were planning for the future of Grand Teton National Park, what would you propose? Please be as specific as possible.

10. Is there anything else you would like to tell us about your visit to Grand Teton National Park?

Did you...

...Indicate the order in which you visited different places each day?

...check your activities and where you spent the night?

...complete the information about you, your group, and your opinions about the park?

Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox--no postage is needed.