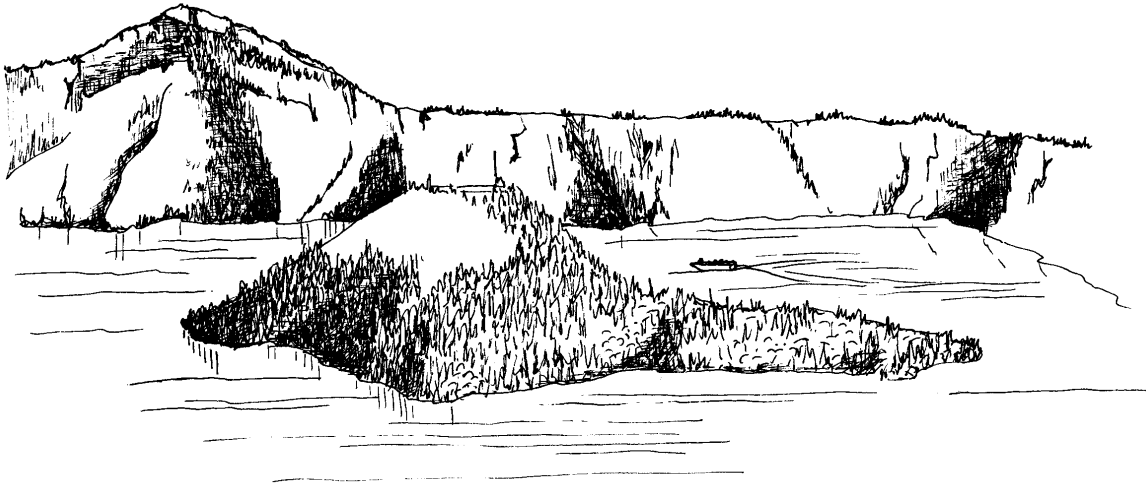


Crater Lake National Park Visitor Study



**The
Visitor Services
Project**

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

Crater Lake National Park
P.O. Box 7
Crater Lake, Oregon 97604-0007

IN REPLY REFER TO:

August, 2001

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Crater Lake National Park. This information 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 after your visit to complete.

When your visit is over, please complete the questionnaire. Seal it with the stickers 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 Natural Resources, P.O. Box 441133, University of Idaho, Moscow, Idaho 83844-1133, phone 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

Charles V. Lundy
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 Information Collection Clearance Officer, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

Please go on to the next page ➡

4. a) On this visit, in what activities did you and your group participate at Crater Lake National Park? Please check (✓) **all** that apply.
- b) On a future visit, what activities would you and your group participate in at Crater Lake National Park. Please check (✓) **all** that apply.

On this visit (✓)	On a future visit (✓)
<input type="checkbox"/> SIGHTSEEING/ SCENIC DRIVE	<input type="checkbox"/>
<input type="checkbox"/> HIKING	<input type="checkbox"/>
<input type="checkbox"/> BICYCLING	<input type="checkbox"/>
<input type="checkbox"/> OVERNIGHT BACKPACKING	<input type="checkbox"/>
<input type="checkbox"/> CAMPING IN DEVELOPED CAMPGROUND	<input type="checkbox"/>
<input type="checkbox"/> PICNICKING	<input type="checkbox"/>
<input type="checkbox"/> NATURE STUDY (geology, birds/other animals, plants, etc.)	<input type="checkbox"/>
<input type="checkbox"/> PHOTOGRAPHY	<input type="checkbox"/>
<input type="checkbox"/> ATTENDING RANGER-LED ACTIVITIES	<input type="checkbox"/>
<input type="checkbox"/> TAKING BOAT TOUR	<input type="checkbox"/>
<input type="checkbox"/> FISHING	<input type="checkbox"/>
<input type="checkbox"/> SHOPPING	<input type="checkbox"/>
<input type="checkbox"/> DINING	<input type="checkbox"/>
<input type="checkbox"/> VIEWING CRATER LAKE	<input type="checkbox"/>
<input type="checkbox"/> CROSS COUNTRY SKIING	<input type="checkbox"/>
<input type="checkbox"/> SNOWSHOEING	<input type="checkbox"/>
<input type="checkbox"/> OTHER (Please describe: _____)	<input type="checkbox"/>

5. a) Have you and/ or any members of your group visited Crater Lake National Park during the winter months (November through April)?
- YES NO NOT SURE
- b) Is Crater Lake National Park a place you and/ or your group members would consider visiting for a winter vacation (November through April) in the future?
- YES NO NOT SURE
- c) Would you and/ or your group members be willing to pay a modest fee to take a bus or over-snow vehicle to the rim to see Crater Lake in the winter when the road is closed to private vehicles?
- YES NO NOT SURE

Please go on to the next page ➡

6. a) On this visit to Crater Lake National Park, did you and/ or your group go hiking?

YES NO → **Go on to Question 7**



- b) If YES, which of the following trails did you and/ or your group hike on this visit?

To locate the trails, use the map on page 9. Please check (✓) **all** that apply.

- SUN NOTCH VIEWPOINT
- WATCHMAN PEAK
- CASTLE CREST WILDFLOWER TRAIL
- GODFREY GLEN TRAIL
- ANNIE CREEK CANYON TRAIL
- CLEETWOOD COVE LAKESHORE TRAIL
- DISCOVERY POINT TRAIL
- MOUNT SCOTT
- GARFIELD PEAK
- MUNSON VALLEY HISTORICAL TRAIL
- CRATER PEAK TRAIL
- PACIFIC CREST TRAIL
- OTHER TRAILS (Please specify: _____)

7. At Crater Lake National Park, most visitors talk to a park ranger as they enter at the park entrance station. During this visit, did you and your group have a conversation with a ranger **other than at the entrance station**?

YES NO DON'T REMEMBER

8. On this trip, what was the **primary** reason that you and your group visited the Crater Lake National Park area (within 100 miles of the park)? Please check (✓) **only one**.

- VISIT CRATER LAKE NATIONAL PARK
- VISIT OTHER ATTRACTIONS IN THE AREA
- VISIT FRIENDS/ RELATIVES IN THE AREA
- BUSINESS OR OTHER REASONS

9. For each of the following attributes of Crater Lake National Park, please rate its importance (from 1 to 5, or DK for “don’t know”) in planning for the preservation of the park for future generations. Please circle **one** answer for each attribute.

How important?	Not important	Somewhat important	Extremely important	Don't know		
NATIVE PLANTS	1	2	3	4	5	DK
WILDLIFE	1	2	3	4	5	DK
CLEAN AIR/ WATER	1	2	3	4	5	DK
HISTORIC BUILDINGS/ ARCHEOLOGICAL SITES	1	2	3	4	5	DK
DESIGNATED WILDERNESS/ BACKCOUNTRY	1	2	3	4	5	DK
DEVELOPED RECREATIONAL FACILITIES (campgrounds, trails, etc.)	1	2	3	4	5	DK
NATURAL QUIET/ SOUNDS OF NATURE	1	2	3	4	5	DK
NIGHT SKY/ STARGAZING	1	2	3	4	5	DK
SOLITUDE	1	2	3	4	5	DK
EDUCATIONAL PROGRAMS	1	2	3	4	5	DK

10. a) Which park entrance(s) did you and your group use to **enter** Crater Lake National Park on this trip? Please check (✓) **all** that apply.

- b) Which park entrance(s) did you and your group use to **exit** Crater Lake National Park on this trip? Please check (✓) **all** that apply.

Enter (✓) _____ Exit(✓)

_____ WEST ENTRANCE (from Medford) _____

_____ SOUTH ENTRANCE (from Klamath Falls) _____

_____ NORTH ENTRANCE (from Roseburg) _____

_____ NORTH ENTRANCE (from Highway 97) _____

Please go on to the next page ➡

11. On this trip, which of the following places in Crater Lake National Park did you and your group visit? Please check (✓) **all** that apply. Use the map on the next page to help you locate the places visited.

<input type="checkbox"/> RIM VILLAGE	<input type="checkbox"/> EAST RIM DRIVE
<input type="checkbox"/> WEST RIM DRIVE	<input type="checkbox"/> MAZAMA VILLAGE
<input type="checkbox"/> WIZARD ISLAND	<input type="checkbox"/> THE PINNACLES
<input type="checkbox"/> RIM VILLAGE VISITOR CENTER	<input type="checkbox"/> CLOUD CAP
<input type="checkbox"/> STEEL INFORMATION CENTER	<input type="checkbox"/> WATCHMAN LOOKOUT
<input type="checkbox"/> PHANTOM SHIP OVERLOOK	<input type="checkbox"/> PUMICE DESERT
<input type="checkbox"/> GRAYBACK MOTOR NATURE TRAIL	
<input type="checkbox"/> HIGHWAY 62 OVERLOOKS/ PICNIC AREAS	
<input type="checkbox"/> OTHER (Please describe: _____)	

12. On this trip, how many times did you and your group enter Crater Lake National Park?

NUMBER OF TIMES YOU ENTERED DON'T KNOW

13. a) On this trip, did you and your group stay overnight away from home within a 100-mile radius of Crater Lake National Park?

YES NO → **Go on to Question 14**



- b) Please list the number of nights you and your group stayed within a 100-mile radius of Crater Lake National Park?

Inside park _____ Within 100 miles outside park _____

_____ NUMBER OF NIGHTS _____

- c) In what type of lodging did you and your group spend the night(s)? Please check (✓) **all** that apply.

(✓) Inside park _____ Within 100 miles outside park (✓) _____

LODGE, MOTEL, CABIN, RENTED CONDO/ HOME, B&B _____

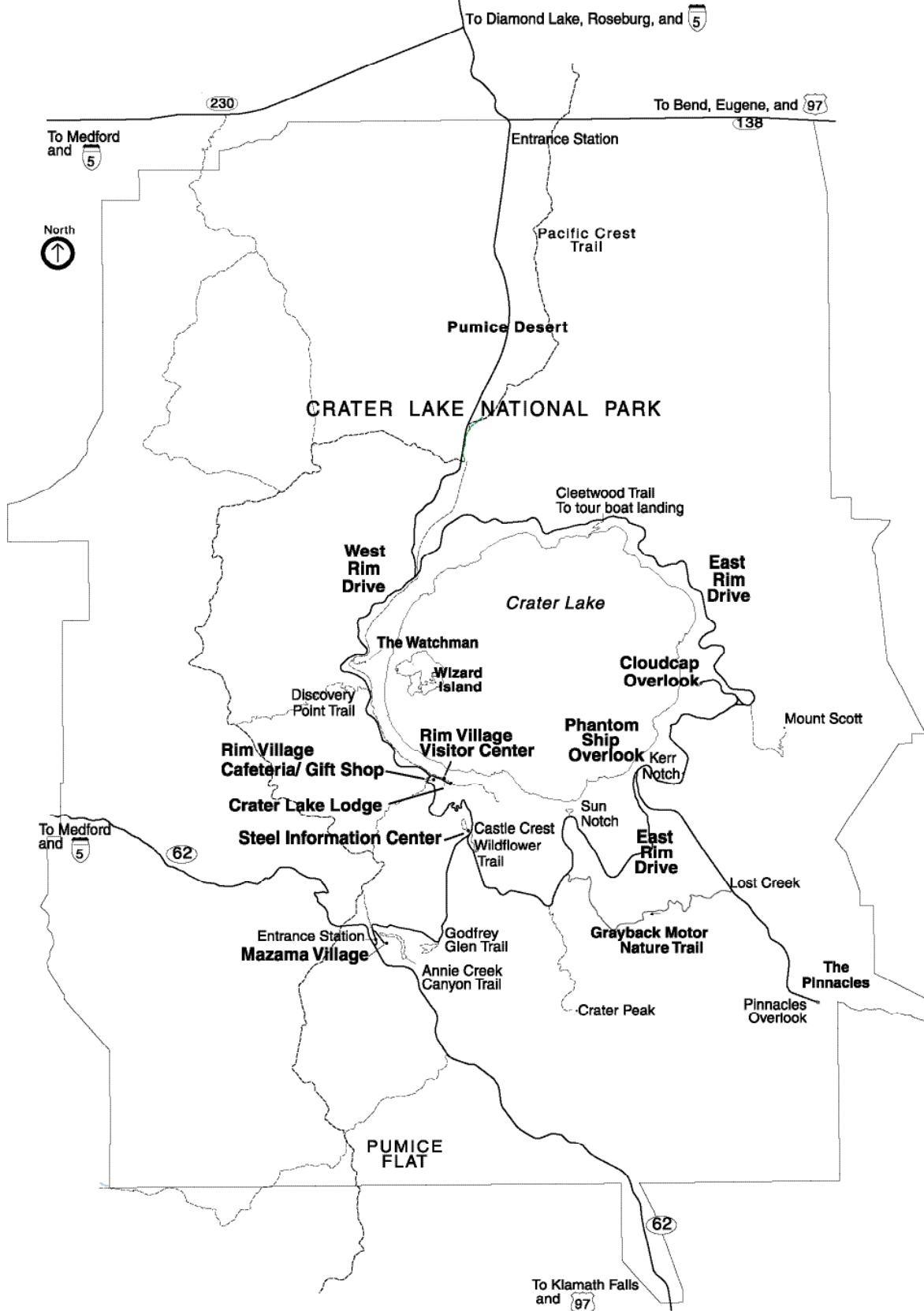
CAMPGROUND/ TRAILER PARK _____

BACKCOUNTRY CAMPSITE _____

SEASONAL RESIDENCE _____

RESIDENCE OF FRIENDS OR RELATIVES _____

OTHER (Please specify: _____) _____



Please go on to the next page ➡

14. a) Please check (✓) the visitor services and facilities that you or your group used during this visit to Crater Lake 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 facility/ service?	If used, how important?					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										
_____ VISITOR CENTERS										
_____ ASSISTANCE FROM PARK STAFF										
_____ ROADS										
_____ PARKING LOTS										
_____ PULLOUTS/ OVERLOOKS										
_____ SHORT TRAILS (1 hour or less in length)										
_____ SIGNS ON SHORT TRAILS										
_____ BACKCOUNTRY TRAILS (1 or more hours in length)										
_____ SIGNS ON BACKCOUNTRY TRAILS										
_____ BACKCOUNTRY CAMPSITES										
_____ LOST CREEK CAMPGROUND										
_____ RESTROOMS										
_____ ACCESS FOR DISABLED PERSONS										
_____ PICNIC AREAS										
_____ PARK DIRECTIONAL SIGNS										

18. On this visit, were you and your personal group with a guided tour group?

_____ YES _____ NO

19. For you and your personal group, please indicate:

	Gender M=male F=female	Current age	U.S. Zip Code or name of foreign country	Number of visits made to this park (including this visit)	
				past 12 months	2 to 5 years ago
YOURSELF	_____	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____	_____

20. For you and each of the **adults** (age 18 or over) in your personal group on this visit, please indicate the highest level of education received. Please check (✓) only **one** for each person.

	Highest level of education				
	Some high school	High school graduate/GED	Some college	Bachelor's degree	Graduate degree
YOURSELF	_____	_____	_____	_____	_____
ADULT #2	_____	_____	_____	_____	_____
ADULT #3	_____	_____	_____	_____	_____
ADULT #4	_____	_____	_____	_____	_____
ADULT #5	_____	_____	_____	_____	_____
ADULT #6	_____	_____	_____	_____	_____
ADULT #7	_____	_____	_____	_____	_____

21. For you and each of the **adults** in your group on this visit, please indicate the current income level. Please check (✓) only **one** answer for each person.

	Current income level				
	Less than \$30,000	\$30,001- \$50,000	\$50,001- \$70,000	\$70,001- \$90,000	\$90,001 or more
YOURSELF	_____	_____	_____	_____	_____
ADULT #2	_____	_____	_____	_____	_____
ADULT #3	_____	_____	_____	_____	_____
ADULT #4	_____	_____	_____	_____	_____
ADULT #5	_____	_____	_____	_____	_____
ADULT #6	_____	_____	_____	_____	_____
ADULT #7	_____	_____	_____	_____	_____

22. In what ethnicity and race would you place yourself?

_____ DO NOT WISH TO ANSWER → Go on to Question 23

a) Ethnicity: Please check (✓) **one**.

_____ HISPANIC OR LATINO

_____ NOT HISPANIC OR LATINO

b) Race: Please check (✓) **all** that apply.

_____ AMERICAN INDIAN OR ALASKA NATIVE

_____ ASIAN

_____ BLACK OR AFRICAN-AMERICAN

_____ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

_____ WHITE

_____ OTHER (Please explain: _____)

23. In your opinion, what was the most important information that you learned during this visit to Crater Lake National Park?

Please go on to the next page ➡

24. During this visit to Crater Lake National Park (NP), how much money did you and your group spend? Please report all expenditures by you or your group members for the items listed below while within a 100-mile radius of Crater Lake National Park. Please write "0" if you and your group did not spend any money.

- a) Please list your group's expenditures inside Crater Lake National Park.
 b) Please list your group's expenditures within 100-mile radius of Crater Lake NP.

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

EXPENDITURES IN CRATER LAKE NP/ OUTSIDE WITHIN 100 MILE RADIUS

	INSIDE PARK	OUTSIDE PARK
HOTELS, MOTELS, CABINS, B&B, etc.	\$ _____	\$ _____
CAMPING FEES AND CHARGES	\$ _____	\$ _____
GUIDE FEES AND CHARGES		\$ _____
RESTAURANTS AND BARS	\$ _____	\$ _____
GROCERIES AND TAKE OUT FOOD	\$ _____	\$ _____
GAS AND OIL (auto, RV, boat, etc.)	\$ _____	\$ _____
OTHER TRANSPORTATION EXPENSES (excluding airfare)	\$ _____	\$ _____
ADMISSIONS, RECREATION, ENTERTAINMENT FEES	\$ _____	\$ _____
ALL OTHER PURCHASES (souvenirs, film, books, sporting goods, clothing, etc.)	\$ _____	\$ _____

- c) How many people do the above expenses cover?
 ADULTS (18 years or over) _____ CHILDREN (under 18 years) _____

25. a) Would you and/ or any members of your group return to visit Crater Lake National Park again during the next 5 years?

_____ YES, LIKELY _____ NO, UNLIKELY _____ NOT SURE

b) Would you and your group be willing to ride a shuttle bus around Rim Drive rather than drive your own vehicle, even if it meant waiting for a modest time or paying a modest fee?

_____ YES, LIKELY _____ NO, UNLIKELY _____ NOT SURE

c) Would you and your group be willing to pay a modest fee to ride a shuttle bus around Rim Drive if it provided a park interpreter to inform you as you travel around the lake?

_____ YES, LIKELY _____ NO, UNLIKELY _____ NOT SURE

26. On a future visit to Crater Lake 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 28**

_____ GEOLOGY/ VULCANISM

_____ WILDERNESS

_____ CULTURAL HISTORY

_____ PARK ANIMALS/ PLANTS

_____ PARK ECOSYSTEMS/ ECOLOGY

_____ PRESERVING THE PARK

_____ OTHER (Please specify: _____)

27. If you were a manager planning for the future of Crater Lake National Park what would you propose? Please be specific.

28. Is there anything else you and your group would like to tell us about your visit to Crater Lake National Park?

29. Overall, how would you rate the quality of the visitor services provided to you and your group at Crater Lake National Park during this visit? 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.



OFFICIAL BUSINESS

**Visitor Services Project
Cooperative Park Studies Unit
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