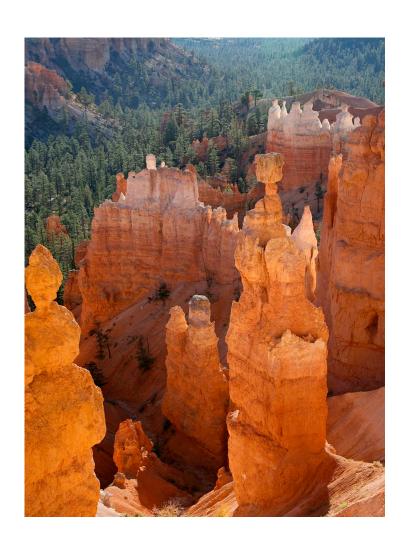


Social Science Program National Park Service U.S. Department of the Interior

Visitor Services Project

Bryce Canyon National Park Visitor Study



OMB Approval 1024-0224 (NPS# 08-036)

Expiration date: 03/31/2010



United States Department of the Interior

NATIONAL PARK SERVICE

Bryce Canyon National Park P.O. Box 640201 Bryce Canyon, UT 84764-0201

IN REPLY REFER TO:

Summer 2009

Dear Visitor:

Thank you for participating in this important study. We want to learn about the expectations, opinions, and interests of visitors to Bryce Canyon National Park. This information will help us improve our management of this park and better serve you, our visitor.

This questionnaire will be given to only a select number of visitors, so your participation is very important! It should only take about 20 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, NPS VSP Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

Eddie L. Lopez Superintendent

DIRECTIONS

At the end of your visit:

- 1) Please have the selected individual complete this questionnaire.
- 2) Answer the questions carefully since each question is different.
- 3) For questions that use circles (O), please mark your answer by filling in the circle with black or blue ink, or a pencil with dark (e.g. #2) lead.

Like this: Not like this: 🕡 💢

- 4) Seal it with the stickers provided.
- 5) Drop it in a U.S. mailbox.

Thank you!

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. 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 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

1.

Your Visit To Bryce Canyon National Park

NOTE: In this questionnaire, **personal group** is defined as anyone that you are visiting the park with, such as spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as school, church, scouts, or tour group.

a) Prior plan apply	to your visit, how did you and your personal group obtain information to your visit to Bryce Canyon National Park (NP)? Please mark (●) all that							
Ο	Obtained no information prior to visit → Go to Question 2							
0	Previous visits							
Ο	Friends/relatives/word of mouth							
Ο	Travel guides/tour books (such as AAA, etc.)							
Ο	Park publications, maps, & brochures, etc.							
Ο	Newspaper/magazine articles							
Ο	Inquiry to park via mail or email							
Ο	Inquiry to park via phone							
Ο	Television/radio programs/videos							
Ο	Bryce Canyon NP website: www.nps.gov/brca							
Ο	Concession website: www.xanterra.com							
Ο	Other websites							
Ο	Chamber of commerce/visitors bureau/state welcome center							
Ο	Information from local motel or other business							
Ο	Other (Please specify)							
	the sources you used prior to this visit, did you and your personal group ve the type of information about the park that you needed?							
Ο	No O Yes → Go to Question 2							
	, what type of park information did you and your personal group need that not available? Please be specific.							

2.	insi		nyon NP	or in the	e area w		overnight away miles of the park	
	Ο	Yes	Ο	No 🗗	Go to	Questi	on 3	
							personal group the number of n	
b	,	per of night				(c) Number o outside park wi	_
		Lodge, mot	el, cabin,	rented o	condo/h	ome, or I	oed & breakfast	
		Camping in	develope	d camp	ground			
	7	At which	location in	n park?				_
		Backcountr	y campsite	е				
		Personal se	easonal re	sidence	e (summ	er home)	
		Residence	of friends	or relati	ives			
		Other (Plea	se specify	below))			
Insi	de par	k			Outside	park		
3.	Bry		NP? İf you				he night before y write the name	
	Ne	arest town/ci	ty				State	
	NP	ere did you ? If you stay arest town/ci	ed at hom	e, pleas	se write	the nam	he day you left B e of your hometo State	own and state.
4.	a) On	this visit, did	d you and	your pe	rsonal g	roup hik	e at Bryce Canyo	on NP?
	0	Yes		0	No →	Go to 0	Question 5	
	b) If Y		describe th	ne hikin	g you pa	articipate	ed in. Please mar	rk (●) all that
	0	Less tha	n 2 hours			0	Along canyon	rim
	0	Between	2 and 4 h	ours		0	Into canyon be	elow the rim
	Ο	Longer t	han 4 houi	rs				

- 5. a) As you were <u>planning your trip</u>, which activities did you and your personal group expect to include on this visit? Please mark (●) **all** that apply in the **left** column.
 - b) On this visit, in which activities did you and your personal group participate? Please mark (●) all that apply in the right column.

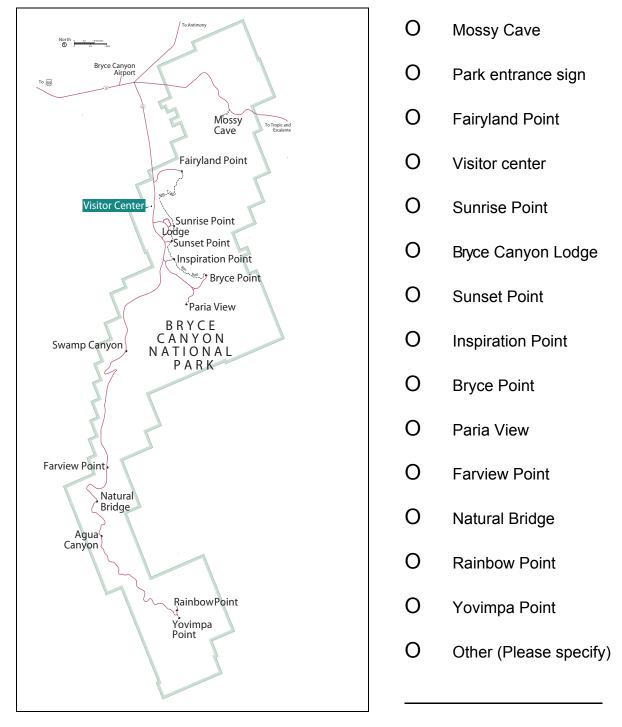
a) Expe		b) Activities this visit
0	Sightseeing/scenic driving	O
Ο	Day hiking	Ο
Ο	Photography	Ο
Ο	Attending ranger-led programs/activities	Ο
Ο	Horseback riding	Ο
Ο	Bicycling	Ο
Ο	Overnight backpacking	Ο
Ο	Camping in developed campgrounds	Ο
Ο	Picnicking	Ο
Ο	Nature study (plants, animals, etc.)	Ο
Ο	Riding shuttle bus	Ο
Ο	Shopping in gift shops/bookstores inside park	Ο
Ο	Stargazing/astronomy	Ο
Ο	Other (Please specify below)	Ο
Expecte	ed This visit	
	one of the above activities was the primary reason you is the Bryce Canyon NP on this visit? Please list online	

spend visiting the park? Please list partial hours or days as 1/4, 1/2, or 3/4.

Number of hours if less than 24 hours

Number of days if 24 hours or more

7. a) On this visit, which of the following sites in Bryce Canyon NP did you and your personal group visit? Please mark (●) all that apply.



b) On this visit, which site in Bryce Canyon NP did you and your personal group visit **first**?

c) On this visit, which one of the above sites did you enjoy most? Please list only **one**.

- 8. a) Please mark (•) **all** information services and facilities that you and your personal group **used** within Bryce Canyon NP during this visit.
 - b) Next, for only those services and facilities that you and your personal group **used**, please rate their importance to your visit from 1-5.
 - c) Finally, for only those services and facilities that you and your personal group **used**, please rate their quality from 1-5.

a)	Information services and facilities used	b) If used, how important? 1=Not important 2=Somewhat important 3=Moderately important 4=Very important	c) If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good
Mai	rk (●)	5=Extremely important	5=Very good
0	Assistance from park staff		
Ο	Bryce Canyon NP website: www.nps.gov/brca (used before o	r during visit)	
0	Bulletin boards		
0	Junior Ranger program		
Ο	Park brochure/map		
Ο	Park newspaper – The Hoodoo		
0	Park radio information stations: AM 1610 and/or AM 1590		
Ο	Ranger-led programs		
Ο	Roadside exhibits		
Ο	Sales items in visitor center books (selection, price, etc.)	tore	
Ο	Self-guided nature trails		
Ο	Shuttle bus		
Ο	Visitor center exhibits		
0	Visitor center video		

- 9. a) Please mark (●) **all** visitor services and facilities that you and your group **used** within Bryce Canyon NP during this visit.
 - b) Next, for only those services and facilities that you and your group **used**, please rate their importance to your visit from 1-5.
 - c) Finally, for only those services and facilities that you and your group **used**, please rate their quality from 1-5.

		b) If used, how important?	c) If used, what quality?
	sitor services and	1=Not important 2=Somewhat important	1=Very poor 2=Poor
fac	cilities used	3=Moderately important	3=Average
Mark	(●)	4=Very important 5=Extremely important	4=Good 5=Very good
	· ,	5-Extremely important	3-very good
0	Access for disabled persons		
0	Backcountry campsites		
0	Bryce Canyon Lodge (not including gift shop or restaurant)		
0	Gift shop in Bryce Canyon Lodge		
0	Restaurant in Bryce Canyon Lodge		
0	Canyon Trail Rides horseback rides	<u></u>	
0	Developed campgrounds		
0	General store		
0	Park road directional signs (inside p	ark)	
0	Parking areas		
Ο	Picnic areas		
Ο	Recycling bins		
0	Restrooms		
0	Showers/laundromat		
0	Trails		
Ο	Trash cans/dumpsters		

10. a) Bryce Canyon NP was established for viewing scenery, conserving natural resources, and promoting public enjoyment and appreciation of these resources. On this visit, how important were the following attributes/resources to you and your personal group? Please mark (●) one answer for each attribute/resource.

Attribute/resource	Not important	Somewhat important	Moderately important	•	Extremely important
	<u> </u>	·	·	<u>.</u>	
Clean air	0	0	Ο	0	Ο
Geologic formations	0	0	0	0	Ο
Scenic drive	0	0	Ο	0	Ο
Scenic views	0	0	0	0	Ο
Interpretive/informational programs	Ο	0	Ο	Ο	0
Recreational opportunities (hiking, camping, biking, etc.)	Ο	0	0	Ο	Ο
Human/cultural history	0	0	Ο	0	Ο
Solitude	0	0	0	0	Ο
Natural quiet/sounds of nature	0	0	0	0	0
Plants and animals	0	0	0	Ο	0
Dark, starry night sky	0	0	0	Ο	0
Learning/educational opportunities	Ο	Ο	Ο	0	Ο
b) Did anything detract from y resources?	our enjoyn	nent of any	of the abov	ve attribut	es or
O Yes	O No	→ Go to	Question 1	11	
c) If YES, what? Please expla	ain				

11. a) Bryce Canyon NP interpretive programs and exhibits discuss topics such as geology, American Indian culture/history, pioneer history, night skies/astronomy and plants/animals. Please mark (●) all of the topics you learned on this visit.

O Did not learn about any topics on this visit -> Go to part c of this question

- b) Please indicate how much your level of understanding of each topic improved during your visit. Please mark (•) **one** answer for each topic.
- c) Next, mark (●) the topics you would be interested in learning more about on a future visit.

a) Learned on this visit?		o) Level of	underst	c) Interested on future visit?			
(●)		Not at all	A little	Somewhat	A lot	Yes	No
Ο	American Indian culture/history	0	Ο	Ο	Ο	0	Ο
Ο	Geology	0	Ο	Ο	Ο	0	0
Ο	Night skies/ astronomy	0	Ο	Ο	Ο	0	0
Ο	Pioneer history	0	Ο	0	0	0	0
Ο	Plants/animals	0	0	Ο	0	0	0

d) Please list any additional topics you and your personal group are interested in learning about Bryce Canyon NP.

^{12.} Increasing public awareness is our best tool to ensure that visitors have a safe visit at Bryce Canyon NP. Please mark (●) your awareness level, both before and after your visit, for each safety issue.

BEFOR	E visiting B	ryce Ca	anyon NP AFTER	visiting	Bryce Cany	on NP
Not aware	Somewhat aware	Very aware	Safety issue	Not aware	Somewhat aware	Very aware
Ο	Ο	0	Hiking with hiking boots	0	0	0
0	0	Ο	Lightning safety	0	0	Ο
0	Ο	0	Drinking plenty of water	Ο	0	Ο
0	Ο	Ο	Methods for coping with altitude sickness	Ο	Ο	Ο
0	Ο	Ο	Human health and safety risks resulting from feeding wildlife	Ο	0	Ο
0	0	0	Hiking off trails	Ο	0	Ο
0	0	0	Climbing over railings	Ο	0	Ο
0	0	0	Ways of minimizing sun exposure	0	0	0

13.	a)			Bryce Car ble and/or v					personal g	roup feel crowded
		0	Yes	() N	o →	Go	to Questi	on 14	
	b)		felt by p							nd your personal ark (●) one for
				Not at all Crowded		mew		Neutral	Very crowded	Extremely d crowded
		Peop	le	0		0		0	0	0
		Vehic	cles	Ο		Ο		0	0	Ο
	c)			remely crov e you and y						e specific park
	d)	At wh	nich time	s of day did	you fe	el cro	wded	d? Please	mark (•)	all that apply.
		Ο	Morni (before		0	Afte (Noo	ernoc n-6 p		Ο (Evening after 6 pm)
14.	a)	the m	nain park		May to	Septe	embe	r. On this		rt visitors around ou and your
		Ο	Yes		Ο	No	→	o) If NO, w	hy not? _	
	c)									nuttle bus? Please
		Ο	Ruby's	Inn	0	Shu	uttle E	Boarding A	Area (oppo	osite Ruby's Inn)
		Ο	Visitor	center	Ο	Tra	iler d	rop-off lot	(opposite	visitor center)
		Ο	Sunset	Point	Ο	Ruby's Inn Campground				
		Ο	Other (Please spe	cify)					
	d)	How	can the	shuttle syst	em and	servi	ces l	oe improv	ed? Please	e be specific.
										_

O

15. Units of the National Park System are established to preserve places with outstanding natural and cultural resources and to provide ways for visitors to enjoy these resources. Scientific research on park natural and cultural resources is needed to properly protect these resources. a) In your opinion, how important is conducting scientific research on park natural and cultural resources? Moderately Not Somewhat Verv Extremely important important important important important O O \mathbf{O} \mathbf{O} ()b) Do you think conducting scientific research on natural and cultural resources is a valuable use of public land and monies? \mathbf{O} Yes Nο c) Are you and your personal group interested in learning about the latest research that is being conducted in national park units? \mathbf{O} Yes No → Go to Question 16 d) If YES, how would you and your personal group like to learn about this research? Please mark (•) all that apply. O O Park website **Brochures** O \mathbf{O} **Exhibits** Ranger-led programs 0Other (Please specify) 16. On this visit, were you and your personal group part of the following types of groups? Please mark (●) **one** for each. \mathbf{O} \mathbf{O} Yes a) Commercial guided tour group No \mathbf{O} \mathbf{O} b) School/educational group Yes Nο O O c) Other group (scout, work, church, etc.) Yes No d) If you were with one of these organized groups, how many people, including yourself, were in this group? _____ Number of people in organized group 17. On this visit, what kind of personal group (not guided tour/school/other organized group) were you with? Please mark (●) one. \bigcirc O Alone Family O 0Friends Family and friends

Other (Please specify)

18.	8. a) On this visit, how many people were in your personal group, including yourself? Number of people							
	,	is visit, how many v park?	ehicles did you	and you	r personal group use to arrive			
		_ Number of vehicl	es					
		is trip, how many tii on NP?	mes did you and	your pe	rsonal group enter Bryce			
		_ Number of times						
19.		and your personal know the answer, p			se provide the following. If you			
		a) Current age	b) U.S. Zip (or nam country than l	e of other	c) Number of lifetime visits to Bryce Canyon NP (including this visit)			
You	rself							
Mer	mber #2							
Mer	nber #3							
Mer	nber #4							
Mer	nber #5							
Mer	nber #6				<u> </u>			
Mer	nber #7							
20.					sical condition that made it vices at Bryce Canyon NP?			
	Ο	Yes (O No → G o	to Que	estion 21			
	b) If YES	S, on this visit, whic sing or participating	h activities or se g in? Please ma	rvices di k (●) all	d the person(s) have difficulty that apply.			
	Ο	Bryce Canyon Loc	dge	Ο	Campground			
	0	Ranger-led activiti	es/programs	Ο	Restrooms			
	0	Trails		0	Viewpoints			
	0	Visitor center		0	Visitor center exhibits			
	Ο	Other (Please spe	cify)					

21.						canyon NP, which roup prefer to us		
a)S	peaking	Ο	English	0	Other (Specify)		
b)R	eading	Ο	English	0	Other (Specify)		
c) Ir th	n your opii nan Englis	nion, s h? Pl	what service ease specify	s in the p	oark need e(s) or ma	d to be provided ark (●) "None."	in langı	uages other
S	Service(s)						Ο	None
22.			nanager plan Please be sp		he future	of Bryce Canyo	on NP, w	vhat would
23	Is there a	nythii	na else vou s	and vour	personal	group would like	a to tell i	us about
20.			yce Canyon		- Croonar	group would like		
24.	opportur	nities		ou and y	our perso	e facilities, servi onal group at Bry		
	Very p	oor	Poor	A	verage	Good	Vei	ry good
	0		Ο		Ο	Ο		0

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

Printed on recycled paper

OFFICIAL BUSINESS

Visitor Services Project
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
Moscow, Idaho 83844-1139