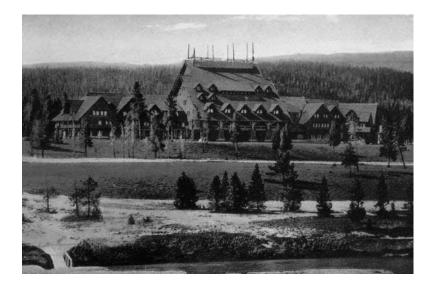


Social Science Division National Park Service U.S. Department of the Interior

Visitor Services Project

Yellowstone National Park Visitor Study



Yellowstone National Park Visitor Study

OMB Control Number: 1024-0224 Expiration Date: 2011



United States Department of the Interior

NATIONAL PARK SERVICE

Yellowstone National Park Yellowstone NP, WY 82190

IN REPLY REFER TO:

July 2011

Dear Visitor:

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

This questionnaire is only being given to a select number of visitors, so your participation is very important. It should only take about 20 minutes to complete after your visit.

When your visit is over, please complete this questionnaire. Seal it in the postage-paid envelope provided 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,

Daniel N. Wenk Superintendent

DIRECTIONS

At the end of your visit:

- 1. Please have the selected individual (at least 16 years old) complete this questionnaire.
- 2. Answer the questions carefully since each question is different.
- 3. For questions that use circles (0), please mark your answer by filling in the circle with black or blue ink. Please do not use pencil!

Like this: Not like this: \cancel{X}





- 4. Seal it in the postage-paid envelope provided.
- 5. Drop it in a U.S. mailbox.

Paperwork Reduction Act Statement: The Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. This information will be used by the National Park Service as authorized by 16 U.S.C. 1a-7. We will use this information to evaluate visitor services cooperatively managed by Yellowstone National Park, Your response is voluntary. Your name and address have been requested for follow-up purposes only. At the completion of this collection all names and personal information will be destroyed and in no way be connected with the results of this survey. A Federal agency may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB Control Number. We estimate that it will take an average of 20 minutes to complete the survey associated with this collection of information. You may send comments concerning the burden estimates or any aspect of this information collection to Margaret Littleiohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

Your Visit To Yellowstone National Park

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

- 1. a) Prior to this visit, how did you and your personal group obtain information about Yellowstone National Park (NP)? Please mark (●) all that apply in column (a).
 - Did not obtain information prior to visit

 Go to part (b) of this question
 - b) If you were to visit Yellowstone NP in the future, how would you and your personal group prefer to obtain information about the park? Please mark (•) all that apply in column (b).

a) This visit	b) Future visit	Source of information
0	0	Friends/relatives/word of mouth
0	Ο	Inquiry to park via phone, mail, or email
0	Ο	Local businesses (airport, hotels, motels, restaurants, etc.)
0	Ο	Maps/brochures
0	Ο	Newspaper/magazine articles
0	0	Previous visits
0	0	School class/program
0	0	Social media (e.g., Facebook, Twitter, etc.)
0	0	State welcome center/visitors bureau/chamber of commerce
0	0	Television/radio programs/DVDs
0	0	Travel guides/tour books (such as AAA, etc.)
0	0	Yellowstone NP website: www.nps.gov/yell
0	Ο	Xanterra concession website: www.travelyellowstone.com
0	Ο	Delaware North concession website: www.delawarenorth.com
0	Ο	Other websites
0	n/a	Other, this visit (Specify)
n/a	Ο	Other, future visit (Specify)

Traffic circulation

Other (Specify)

(•) all that apply.

Signs

Service was closed

0

0

5.	a)		is visit, how many times or				enter Yellowstone				
			_ Number of entries								
	b)	Which mark (n entrances did you and y (•) all that apply. (See r	nd your personal group use to enter the park? Please ee map on page 7.)							
		0	West Yellowstone		Ο	North Entrance	(Gardiner)				
		0	South Entrance (Flagg	Ranch)	0	Northeast Entra	nce (Cooke City)				
		0	East Entrance (Cody)								
	c)	the pa	s visit, how many vehicle rk? Please write "0" if yo				p use to arrive at				
			Number of vehicles								
 a) For this trip, please mark (●) all the park locations that you and your group visited in Yellowstone NP. If you did not visit a location, please line blank. Use the map on the next page to help you identify the location. 							ease leave that				
	b)	b) & c) Please list the amount of time you spent at each location in hours or days. If you spent less than 24 hours, list the number of hours in column (b). If you spent 24 hours or more, list the number of days in column (c). Also list the total time spent in Yellowstone NP. List partial hours or days as 1/4, 1/2, 3/4.									
a)	Vis	sited pa	ark location (●)		s spen		ays spent—if 24 ours or more				
C)	Mam	moth Hot Springs	=							
C)	Madi	son	_							
C)	Old F	aithful	_							
C)	West	Thumb/Grant Village	_							
C)	Fishing Bridge/Lake Village/ Bridge Bay		_							
C)	Towe	er-Roosevelt	_							
C)	Cany	on Village	_							
		time s this vis	pent in Yellowstone NP sit	-							
	d)		you and your personal gou had planned to visit?	roup able	to visit	all the locations	in Yellowstone NP				

Yes → Go to Question 7

Yellowstone National Park Visitor Study

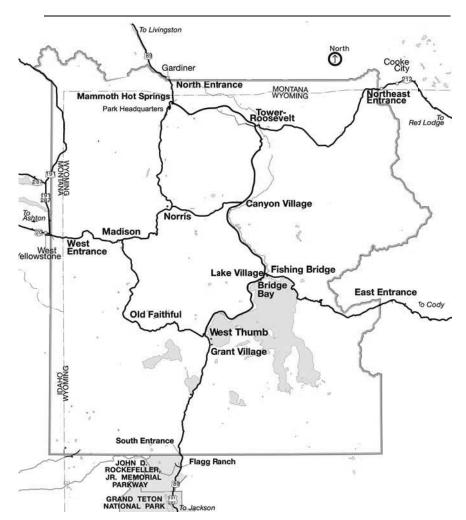
6

No

8

e) If NO, why not?		

f) Which locations were you and your personal group unable to visit?



7. a) On this trip, did you and your personal group stay **overnight away from home** in Yellowstone NP or in the area within 150 miles of any entrance point?

0	Yes	Ο	No → Go to Question 8
\circ	168	0	NO 7 GO IO QUESTION

	b) If YE	S, pleas	se list the nun	nber of	f nights you and your persona	al group stayed.
		_ Num	ber of nights i	nside	Yellowstone NP	
		_ Num	ber of nights	outside	e Yellowstone NP within 150 i	miles of park
	c) & d) I	n which	types of acc	ommo mark (dations did you and your pers ●) all that apply.	sonal group spend
c) I	nside pa	_	.(-)		(d) Outside park within 150 miles
0	Lodge	e, mote	I, cabin, rente	ed cond	do/home, or bed & breakfast	0
	🔰 If you	stayed	inside the pa	ark, in	what type of lodging?	
	🔰 If you	stayed	inside the pa	ırk, at	what location?	
0	Camp	oing in o	developed car	mpgro	und	0
0	Back	country	campsite			0
0	Perso	onal sea	asonal resider	nce		0
0	Resid	lence o	f friends or re	latives	:	0
0	Other	· (Pleas	e specify belo	ow)		0
Ins	side				Outside	
8. a)	the nigh name of	nt after f the tov	visiting Yellov vn/city and st	wstone ate wh	or personal group stay on the NP? If you stayed at home, here you live.	please write the
b)) AFTER	visit:	Town/city		State	
9.	a) On th	is visit,	did you and y	our pe	ersonal group visit the Old Fa	ithful Inn?
	0	Yes		0	No	
	b) On th Inn?	is visit,	did you and y	our pe	ersonal group stay overnight a	at the Old Faithful
	0	Yes		Ο	No	

10.	Yellowstone NP? Please mark (●) all that apply.										
	0	Attending ranger-led p	rograi	ms							
	0	Boardwalk/geyser basin									
	0	Camping in developed campgrounds									
	0	Creative arts (painting/drawing/photography/writing)									
	0	Day hiking	Day hiking								
	0	Eating in park restaura	ants								
	0	Overnight backpacking	g (can	nping in the	backcc	ountry)					
	0	Picnicking									
	0	Shopping in park book	stores	3							
	0	Shopping in park stores (gift shops and general stores)									
	0	Sightseeing/taking a scenic drive									
	0	Staying in park lodging	9								
	0	Viewing roadside/trails	side ex	khibits							
	0	Viewing wildlife/birdwa	atching	9							
	0	Visiting park visitor ce	nter(s))/museum(s) How	many did you visit?					
	0	Other (Please specify)				_					
						reason you and your personal list only one response.					
11.	On a f availa	future visit, would you a ble in developed areas	ind yo in Yel	ur group like lowstone Ni	e to hav	ve the following services					
	a) Cel	I phone	0	Yes	0	No					
	b) Inte	ernet access	0	Yes	0	No					
	c) Oth	er (Please specify)									

- NOTE: Commercial services at Yellowstone NP include lodging, food, camping, gas stations, gift shops and medical services that are provided by concessionaires such as Xanterra, Delaware North, etc.
- 12. a) On this visit to Yellowstone NP, which of the following commercial services did you and personal your group use? Please mark (•) all that apply.
 - b) If you and your personal group used lodging, campgrounds and/or restaurants/food services, were you able to get your first choice of location?
 - c) Did the commercial services that you and personal your group used meet your expectations? Please circle one.
 - d) Please rate the value (from 1 to 5) of the commercial services you and personal your group used, for the money you paid.

) ervice sed (•)	Commercial service in Yellowstone NP	b) Did y your choi (Circle	first ce?	expect 3=Better	than ted what ted	was expected	d) Value for money you paid 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
0	Lodging	Yes	No	1	2	3	
0	Campgrounds	Yes	No	1	2	3	
0	Restaurants/food service	Yes	No	1	2	3	
0	Purchase gas	n/	а	1	2	3	
0	Purchase gifts/ souvenirs	n/a		1	2	3	
0	Medical services	n/	а	1	2	3	
	ou marked "No" or ase explain where a ion				to par easor	. , .	c) of this question,
	ou marked "Very po ere and why. ion	- or" or "P -	oor" in		of this		n please explain
g) If y	ou marked "Very go	- ood" in p	art (d)	of this qu	ıestio	n, please	e explain.

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- 13. a) Prior to your visit to Yellowstone NP, which concession services and activities did you or your personal group plan to do, or make reservations for, before arrival? Please mark (●) all that apply.
 - b) Please mark (•) all the concession services and activities that you or personal your group used during this visit to Yellowstone NP.
 - c) Next, for **only** those services and activities that you or your personal group **used**, please rate their importance to your visit from 1-5.
 - d) Finally, for **only** those services and activities that you or your personal group **used**, please rate their quality from 1-5.

service/ activity planned or reserved in Yellowstone NP before visit?	activ Yello this	cession service/ vity used in owstone NP on visit	c) If used, how important? 1=Not at all important 2=Slightly important 3=Moderately important 4=Very important 5=Extremely important	what quality? 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
0	0	Bicycle tour		
Ο	Ο	Boat rental		
Ο	Ο	Cookout		
0	0	Guided canoe/kayak trip	o	
0	Ο	Guided fishing trip		
0	0	Guided hiking trip		
0	0	Guided overnight backp	oacking trip	
0	0	Guided overnight horse	pack trip	
0	0	Natural history tour (not ranger-guided)		
Ο	Ο	Photography tour		
Ο	0	Scenic boat tour		
Ο	0	Scenic motorized tour		
Ο	0	Trail ride		
Ο	0	Stagecoach ride		
Ο	0	Yellowstone Association	n Institute	

- 14. For you and your personal group, please report all expenditures for the items listed below for this visit to Yellowstone NP and the surrounding area (within 150 miles of any entrance point). Please write "0" if no money was spent in a particular category.
 - a) Please list your personal group's total expenditures inside Yellowstone NP.
 - b) Please list your group's total expenditures outside the park (within 150 miles).

NOTE: Surrounding area residents should only include expenditures that were just for this visit to Yellowstone NP.

	a) Ins	EXPENI ide park	_	ES utside park		
Spent no money (●)	O -	Go to (b)	0	→ Go to (c)		
Lodges, hotels, motels, cabins, B&Bs, etc.	\$		\$_			
Camping fees and charges			\$			
Guide fees and charges	\$		\$			
Restaurants and bars	\$		\$			
Groceries and takeout food	\$		\$			
Gas and oil (auto, RV, boat, etc.)	\$		\$			
Other transportation expenses (including airfare, rental cars, auto repairs, etc.)	\$		\$_			
Fishing/boating	\$		\$_	\$		
Admission, recreation, entertainment fees	\$		\$_			
All other purchases (souvenirs, film, books, sporting goods, clothing, etc.)	\$		\$_			
Donations	\$		\$_			
c) How many people do the above expen	ses cov	/er?				
Adults (18 years or over) Please write "0" if no children we		_ Children (red by the e				
15. On this visit, were you and your personal organized groups? Please mark (●) one			ollowing	g types of		
a) Commercial guided tour group	0	Yes	0	No		
b) School/educational group	Ο	Yes	0	No		
c) Other (business, church, scouts, work)	0	Yes	0	No		
d) If you were with one of these organized yourself, were in this group?	d group	s, how man	у реор	le, including		
Number of people in organize	d group					

Yel	lowsto	ne N	lationa	l Park	Visitor S	Study	'		13	
16.							al group (not ark (●) one .	guic	ded tour/school/other organized	
	0	,	Alone				C)	Friends	
	0	ı	Family				C)	Family and friends	
	Ο	(Other (Please	e specify	/) <u></u>				
b) On this visit, how many people were in your personal group, including yourself?										
			Numb	er of p	eople in	pers	onal group			
17.	 For you and your personal group on this visit, please provide the following. If you do not know the answer, leave blank. Number of visits to 									
		_	a) Ger M=Ma F=Fen	le	b) Currer age		c) U.S. ZIP of or name of country oth than U.S	of her	Yellowstone NP (including this visit) d) Past 12 months e) Lifetime	
Yc	urself					_				
Me	ember :	#2				_				
Me	ember	#3				_				
Me	ember	#4				_				
Me	ember	#5				_				
	ember :					_				
Me	ember :	#7				_				
18.	For you			at is th	ne highe	st le	el of educati	on y	ou have completed? Please	
	0	So	me hig	h scho	ool		0	В	achelor's degree	
	0	Hig	h scho	ol dipl	oma/GE	D	Ο	G	raduate degree	
	0	So	me coll	lege						
19.	a) & b								IP, which language(s) do you prefer to use for the following?	
a) \$	Speakir	ng:	0	Engli	ish	0	Other (Spe	ecify)	

Other (Specify)

b) Reading: O

English

	c) What services in the park need to be provided in languages other than English? Please specify a service(s) or mark (●) "None."										
0		None	Serv	vice(s)							
20.	a)	Does difficu	anyone i	one in your personal group have a physical condition that made it access or participate in park activities or services?							
		Ο	Yes		0	No	→ Go d	n to Qu	estion 21		
	b)	If YES	s, what s	ervices o	r activitie	s were c	difficult to	access/	participat	e in?	
	c)				l conditio all that a		specific	difficulti	es did the	e person(s	;)
		0	Hearing or pro	(difficult	y hearing or informat	ranger p ion desk	rograms s staff, ev	, bus driv ven with h	ers, audic learing aid	o-visual ex d)	hibits
		0	Visual (of pro	difficulty s ograms, e	seeing exl ven with բ	nibits, dii prescribe	rectional ed glasse	signs, or es, or due	visual aid to blindne	ls that are ess)	part
	O Mobility (difficulty accessing facilities, services, or programs, even with walking aid and/or wheelchair)										
	O Other (Please specify)						_				
21.	a)					sonal gro	oup Hisp	anic or L	atino? Pl	ease mar	k (●)
		one to	_	roup me Me	mber. ember Me	mber M	1ember	Member	Member	Member	
			Yo	urself	#2	#3	#4	#5	#6	#7	-
		Hispan ino	ic or	Ο	0	0	Ο	Ο	0	0	
		not Hisp ₋atino	anic	0	0	0	0	Ο	0	0	
ı	b)	What	is your ra	ace? Wh	at is the ra	ace of e	ach men	nber of y	our perso	nal group	?
		Please	e mark (•) one o	r more fo Member	-			ember. r Member	Member	
				Yourself	#2	#3	#4	#5	#6	#7	
		can Ind ka Nativ		0	0	Ο	0	0	0	0	
Asi				0	0	0	0	0	0	0	
		or Afric rican	an	0	0	0	0	0	0	0	
		Hawai Pacific	ian or Islander	0	0	0	0	0	0	0	
Wh	ite			0	0	0	0	0	0	0	

14

0 20.

21.

Yellowstone National Park Visitor Study

Yel	Yellowstone National Park Visitor Study 15									
22.	a)	Which category be (●) one.	est repr	esents your annual h	ousehold	income? Please mark				
С)	Less than \$24,999	\$150,000-\$199,999							
С)	\$25,000-\$34,999	0	\$75,000-\$99,999	0	\$200,000 or more				
C)	\$35,000-\$49,999	0	\$100,000-\$149,999	0	Do not wish to answer				
	b) How many people are in your household? Number of people									
23		service, stores, gift	shops,	ellowstone NP includ medical clinics, gas group like most abo	stations, et	c. On this visit, what				
	b) On this visit, what did you and your personal group like least about the commercial services (lodging, restaurants/food service, stores, gift shops, medical clinics, gas stations, etc.) in Yellowstone NP?									
24.		there anything else it to Yellowstone N		nd your personal grou	ıp would lik	e to tell us about your				
25.	opi	erall, how would yo portunities provided s visit? Please mari	to you	ı and your personal c	lities, servio group at Ye	ces, and recreational llowstone NP during				
	,	Very poor I	Poor	Average	Good	Very good				
		0	0	0	0	Ο				
		you for your help! Fed and drop it in any		seal the questionnair		stage paid-envelope ted on recycled paper				

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