

U.S. Department of the Interior National Park Service

Social Science Division Visitor Services Project



Yellowstone National Park

Visitor Study



OMB Control Number: 1024-0224 Current Expiration Date: 8-31-2014



United States Department of the Interior

NATIONAL PARK SERVICE

Yellowstone National Park Yellowstone NP, WY 82190



In reply refer to:

February 2012

Dear Visitor:

Thank you for participating in this 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

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 (O), please mark your answer by filling in the circle with **black or blue ink**. Please do not use pencil.

Like this: Not like this: V X O

- 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 managed at Yellowstone National Park. Your responses are voluntary. Your name and contact information have been requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed and will 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 about 20 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection 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.

O

No

Your Visit To Yellowstone National Park

NOTE: In this questionnaire "**personal group**" is defined as you and 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.

- a) Prior to this visit, how did your personal group obtain information about Yellowstone National Park (NP)? Please mark (●) all that apply in column (a).
 - O Did not obtain information prior to visit -> Go to part (b) below
 - b) If you were to visit Yellowstone NP in the future, how would your personal group prefer to obtain information about the park? Please mark (●) **all** that apply in column (b).

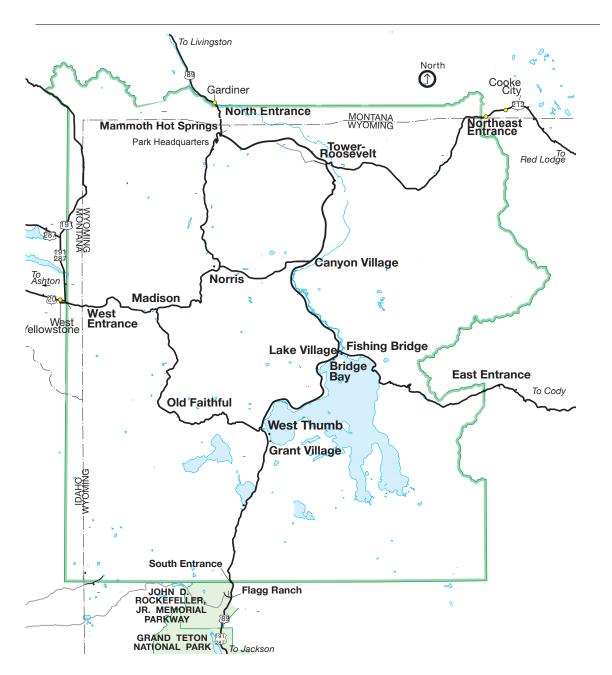
a) This visit	b) Future visit	Source of information
0	0	Friends/relatives/word of mouth
Ο	0	Inquiry to park via phone, mail, or email
Ο	Ο	Local businesses (airport, hotels, motels, restaurants, etc.)
Ο	Ο	Maps/brochures
Ο	Ο	Newspaper/magazine articles
Ο	Ο	Previous visits
Ο	Ο	School class/program
Ο	Ο	Social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

Yes → Go to Question 2

	,		type of park Please be sp		ition a	ia you	r perso	nai groi	up need	tnat was not
2.			hat are the r n 150 miles							ne Yellowstone ly.
	Ο	Visit Ye	llowstone NI	>			Ο	Busi	ness	
	0	Visit Gr	and Teton N	Р			0	Snov	wshoein	ıg/skiing
	0	Visit frie	ends/relative	s in the	area		0	Snov	vmobilir	ng/snowcoach
	O Visit other attractions in the area O Study natural history									
	0	Travelir	ng through -	unplann	ed vis	it	0	Wato	ch wildli	fe
	0	Other (F	Please speci	fy)						
3.	On th NP a	nis visit, w dequate?	ere the sign Please mar	s directi k (●) or	ng you ne ans	ur pers wer fo	sonal g or each	roup to of the fo	and with	hin Yellowstone J.
a)	Intersta	ate signs		O) Y	'es	Ο	No	Ο	Did not use
b)	State h	nighway s	igns	O	Y	'es	Ο	No	Ο	Did not use
,	in deve	eloped are	ervice signs eas of the pa hful, Tower,			es etc.	0	No	Ο	Did not use
4.			one NP, did y ch as lodgin			•			olem fin	ding commercia
	Ο	Yes		Ο	No	→ Go	to Qu	estion 8	5	
		YES, whice) all that a		owing re	asons	contr	ibuted	to the p	roblem?	? Please mark
	0	Signs	3		Ο	Traf	ffic circ	ulation		
	0	Servi	ce was close	ed	Ο	Oth	er (Spe	ecify)		
5.	,		, how many stay in the a		•	•	_	•		wstone NP
		Nun	ber of entrie	es						

6						Yello	wstone Nati	onal Park Visit	or Study
	b)		n entrances did y at apply (see mar			up use t	to enter the	park? Please r	mark (●)
O		West	Entrance (West	Yellowsto	ne)	0	North Entra	ance (Gardiner)
Ο		South	n Entrance (Flagg	Ranch)		0	Northeast E	Entrance (Coo	ke City)
Ο		East I	Entrance (Cody)						
	c)		is visit, how man Please write "0"	•	-	•	• .	se to arrive at	the
			_ Number of veh	icles					
6.	a)	in Yel	nis trip, please ma llowstone NP. If y ap on the next pa	ou did no	t visit a	location	n, please lea	ave that line bla	up visited ank. Use
	b)	y s	Please list the amous spent less that pent 24 hours or otal time spent in	an 24 hou r more, lis	ırs , list st the n	the nun umber o	nber of hours of days in col	s in column (b) lumn (c). Also). If you list the
a)	Vis	sited p	oark location (●))	,	ı rs spe r n 24 ho	nt—if less urs	c) Days sper hours or m	
С)	Mam	nmoth Hot Spring	S					
C)	Madi	ison						
C)	Old I	-aithful						
С)	Wes	t Thumb/Grant V	illage					
С)		ing Bridge/Lake \ dge Bay	/illage/					
C)	Towe	er-Roosevelt						
C)	Cany	yon Village						
		time s this vi	spent in Yellowsto sit	one NP					
	d)		your personal gro	oup able t	o visit a	all the lo	cations in Ye	ellowstone NP	that you
		Ο	No	Ο	Yes	→ Go to	Question	7	
	e)	If NO	, why not?						

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



- 7. a) On this trip, did your personal group stay **overnight away from home** in Yellowstone NP or in the area within 150 miles of the park?
 - O Yes O No → Go to Question 8
 - b) If YES, please list the number of nights your personal group stayed.

_____ Number of nights inside Yellowstone NP

_____ Number of nights outside Yellowstone NP (within 150 miles of the park)

Yes

	c) & d) In which types of accommodations did your personal group spend the night(s)? Please mark (●) all that apply.									
<u>c) lı</u>	ns				ан шасарруу		d) Outside within 150	•		
O		Lodge, mo	otel, cabin, r	ented cor	ndo/home, or bed	& breakfast	t	0		
•	4	lf you staye	ed inside the	e park, in	what type of lodg	jing?				
•	4	lf you staye	ed inside the	e park, at	what location? _					
Ο		Camping i	n developed	d campgro	ound			0		
Ο		Backcoun	try campsite			0				
Ο	O Personal seasonal residence O									
Ο		Residence	e of friends o	or relative	S			Ο		
Ο		Other (Ple	ase specify	below)				0		
Insi	de	!			Outside					
8. a)	af to	fter visiting wn/city and	Yellowstoned state where	e NP? If y e you live	nal group stay on you stayed at hom	ie, please w	rite the nam	e of the		
b)	Α	FTER visit:	Town/cit	У		State _				
9.	a)	On this vis Mammoth		personal	group visit the Old	d Faithful Sr	now Lodge o	or the		
	b)			•	group stay overni	ght at the O	ld Faithful S	now		
	-	•	Mammoth H i sited? No	oler?		•	Stayed ove	ernight? No		
		Ο	0	Old Fa	ithful Snow Lodge	e (C	Ο		
		0	Ο	Mamm	oth Hotel	(O	Ο		
10.	a)		nembers of the		onal group reside	nts of the Y	ellowstone I	NP area		
		O Yes	6	0	No					
	b)	For this tri group visit	p, was visiti ted the area	ng Yellow (within 1	stone NP the pri 50 miles of the pa	mary reason	n that your p	ersonal		

No

11.	 a) On this visit, in which activities did your personal group participate within Yellowstone NP? Please mark (●) all that apply. 									
	0	Attending ranger-led p	orogran	าร						
	0	Boardwalk/geyser bas	sin							
	Ο	Creative arts (painting	/drawir	ng/photograp	ohy/wri	ting)				
	O Eating in park restaurants									
	O Overnight backpacking (camping in the backcountry)									
	Ο	Playing in the snow								
	O Shopping in park bookstores									
	0	Shopping in park store	es (gift	shops and g	eneral	stores)				
	0	Sightseeing/taking a s	cenic c	Irive						
	0	Skiing								
	0	Snowcoach tour								
	0	Snowshoeing								
	0	Staying in park lodging	g							
	0	Viewing roadside/trails	side ex	hibits						
	0	Viewing wildlife/birdwa	atching							
	Ο	Visiting park visitor ce	nter(s)/	museum(s)	How	many did you visit?				
	0	Other (Please specify))							
	,	ich one of the above acted Yellowstone NP on		•	•	eason your personal group one response.				
12.		uture visit, would your ble in developed areas				re the following services				
	a) Cel	I phone	Ο	Yes	Ο	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.

- 13. a) On this visit to Yellowstone NP, which of the following commercial services did your personal group use? Please mark (●) all that apply.
 - b) If your personal group used lodging, campgrounds and/or restaurants/food service, were you able to get your first choice of location?
 - c) Did the commercial services that your personal group used meet your expectations? Please circle one.
 - d) Please rate (from 1 to 5) the value of the commercial services your personal group used, for the money you paid.

a) Service used (●)	Commercial service in Yellowstone NP	Did yo your choi (Circle	u get first ce?	1=W ex 2=At ex 3=Be ex	orse pecte	ed what was ed han ed	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	
Ο	Restaurants/food service	Yes	No	1	2	3	
0	Purchase gas	n/s	а	1	2	3	
Ο	Purchase gifts/ souvenirs	n/a	a	1	2	3	
0	Medical services	n/s	а	1	2	3	
0	Snowcoach tour	n/	а	1	2	3	
0	Snowmobile tour	n/s	а	1	2	3	
, .	ou marked "No" or " ease explain where a		nan ex	pected" t	o par	t (b) or (c) of this question,
Locat	tion					Reason	
f) If you marked "Very poor" or "Poor" in part (d) of this question please where and why. Location Reason							

g) l	g) If you marked "Very good" in part (d) of this question, please explain.								
_									

- 14. a) Prior to your visit to Yellowstone NP, which concession services and activities did 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 your personal group **used** during this visit to Yellowstone NP.
 - c) For **only** those services and activities that your personal group **used**, please rate their importance to your visit from 1-5.
 - d) For **only** those services and activities that your personal group **used**, please rate their quality from 1-5.

2)			c)	d)
a) Concession service/activity planned or reserved in Yellowstone NP before visit (•)	b) Concess service/a used in Yellowston this v (•)	ictivity i one NP	If used, how important? 1=Not at all important 2=Slightly important 3=Moderately important 4=Very important 5=Extremely important	If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
0	0	Cross country ski tou	ır	
Ο	0	Natural history tour (not ranger-guided)		
0	Ο	Photography tour		
Ο	0	Scenic motorized tou (other than snowco or snowmobile)		
0	Ο	Snowcoach tour		
Ο	Ο	Snowmobile tour		
Ο	Ο	Snowshoe tour		
0	Ο	Ski equipment rental		
Ο	Ο	Snowshoe rental		
Ο	Ο	Yellowstone Associa	tion	

- 15. For 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 the park). 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 personal 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. **EXPENDITURES** a) Inside park b) Outside park O → Go to (b) O → Go to (c) Spent no money (●) 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, snowmobile, etc.) Other transportation expenses (including airfare, rental cars, auto repairs, etc.) Admission, recreation, entertainment fees All other purchases (souvenirs, film, books, sporting goods, clothing, etc.) Snowmobiles and coaches **Donations** c) How many people do the above expenses cover? Please write "0" if no children were covered by the expenditures. Adults (18 years or over) Children (under 18 years) 16. On this visit, was your personal group part of the following types of organized groups? Please mark (●) one for each. a) Commercial guided tour group Yes No b) School/educational group Yes No O O c) Other (business, church, scouts, work) 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.				pe of person h? Please				led to	our/sch	ool/ot	ther organiz	ed
	Ο	Alone					Ο	Frie	ends			
	0	Family	1				Ο	Fan	nily and	frien	ıds	
	Ο	Other	(Pleas	e specify) _								
	b) On th	nis visit, l	how m	any people	, inclu	ding yo	ourself,	wer	e in you	ır per	sonal group)?
		Numb	er of p	people in pe	ersona	al group)					
18.				oup on this ve blank.	visit, p	olease p	orovide	the				
		a Gend M=Ma F=Fei	er ale	b) Current age	nan	c) . ZIP c ne of c ner tha	ountry	ď		owstong thi	visits to one NP is visit) e) Lifetime	
Yo	urself							_		_		
Me	mber #2	!						_		_		
Me	mber #3							=		_		
Me	mber #4							_		_		
Me	mber #5							_		_		
Me	mber #6							=		_		
Me	mber #7							_		_		
19.	For you mark (●	-	hat is t	he highest	level o	of educ	ation y	ou ha	ave con	nplete	ed? Please	
	0 8	Some hig	gh sch	ool		C) В	ache	lor's de	gree		
	O F	High sch	ool dip	loma/GED		C) G	radu	ate deg	gree		
	0 8	Some co	llege									
20.				such as Ye onal group						(s) do	most	
a) S	Speaking	: O	Engl	lish	Ο	Other	(Speci	fy) _				
b) F	Reading:	0	Engl	lish	Ο	Other	(Speci	fy) _				

	c)					eed to be poecify a se		ı language	es other th	nan English?
		Ο	Nor	ne S	ervice(s)					
21.	a)					al group hate in park				made it
		Ο	Yes	3		O N	lo → Go d	n to Que	stion 22	
	b)	If YES	s, wh	at service	s or activ	vities were	difficult to	access/p	participate	in?
	c)			of the phys		dition, which	ch specific	difficultie	s did the	person(s)
		0				ring range s, or infor				o-visual earing aid)
		Ο	Visi	ual (difficu	Ity seein	•	directiona	al signs, o	r visual ai	ds that are
		Ο	Mol	oility (diffic	ulty acce	essing faci	lities, serv	•		,
		0		valking aid er (Please		wheelchaiı)	<u>^</u>)			
22.	a)		emb	•	r person	•	lispanic or	Latino? F	Please ma	ark (●) one
			J. J.		Member		Member			
			-	Yourself	#2	#3	#4	#5	#6	#7
	s, F atir	Hispanio no	c or	Ο	Ο	Ο	0	Ο	0	Ο
		ot Hispa atino	anic	Ο	Ο	Ο	0	Ο	0	Ο
	b)			e race of e			ur person	al group?	Please m	ark (●) one
		01 1110	10 10	•	Member		Member	. Member	Member	Member
				Yourself	#2	#3	#4	#5	#6	#7
		can Ind laska N		e O	0	0	0	0	0	0
Asi	an			0	Ο	0	Ο	Ο	0	0
		or Afric erican	an	0	0	0	0	0	Ο	0
0	r o	e Hawai ther Pa nder		Ο	Ο	Ο	Ο	0	0	Ο
Wh	ite			0	O	0	0	0	0	0

23.		Which category bes (●) one .	st repres	sents your annual hou	sehol	d income? Please mark
(O	Less than \$24,999	9 0	\$50,000-\$74,999	Ο	\$150,000-\$199,999
(0	\$25,000-\$34,999	Ο	\$75,000-\$99,999	0	\$200,000 or more
(O	\$35,000-\$49,999	Ο	\$100,000-\$149,999	Ο	Do not wish to answer
	b) l	How many people a	are in yo	our household?	Nu	mber of people
24.	, (service, stores, gift	shops, etc. On	llowstone NP include I medical clinics, gas sta this visit, what did you ces?	ations	, snowcoach tours,
	,	services (lodging, r	estaurai	personal group like lea nts/food service, stores ours, snowmobile tours	s, gift	shops, medical clinics,
	_					
25.		here anything else llowstone NP?	your pe	rsonal group would lik	e to te	ell us about your visit to
26.	opp					rvices, and recreational one NP during this visit?
	`	Very poor F	Poor	Average	Good	Very good
		Ο	Ο	Ο	Ο	Ο
T I			. .			

Thank you for your help! Please seal the questionnaire in the postage-paid envelope provided and drop it in any U.S. mailbox.

 Printed on recycled paper

OFFICIAL BUSINESS

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