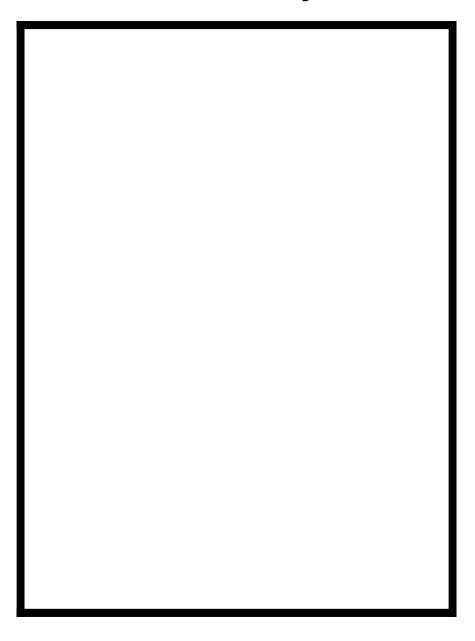
Belle Haven Park/ Dyke Marsh Wildlife Preserve Visitor Study



The Visitor Services Project

OMB Approval 0124 Expiration Date: 11-30-93

May, 1993

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the visitors to the Belle Haven Park/Dyke Marsh Wildlife Preserve, the activities or programs you enjoyed, the places you visited, and to get your opinions about your visit.

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 the Belle Haven Park/Dyke Marsh Wildlife Preserve.

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.

If you have any questions, about this study please contact Dr. Gary E. Machlis, Sociology Project Leader, Cooperative Park Studies Unit, University of Idaho, Moscow, Idaho 83843.

We appreciate your help.

Sincerely,

Kitty Roberts 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.

from your starting point to Belle Haven Park/Dyke Marsh Wildlife Preserve? Please check (/) <u>all</u> that apply.	ve
METROBUS/DASHBUS	
PRIVATE VEHICLE	
WALK	
CAB	
BICYCLE	
OTHER (Please describe:	
)	

PRIVACY ACT AND PAPERWORK REDUCTION ACT statement: 16 U.S.C 1a-7 authorizes the 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.

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 Service Information Collection Clearance Officer, National Park Service, P.O. Box 37127, Washington D.C. 20013-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0101, Washington D.C. 20503.



2.

<u>his</u> visit	t .	Past vis
	MOUNT VERNON TRAIL	
	RESTROOMS	
	BOAT SLIPS	
	BOAT RAMP	
	VENDING MACHINES	
	PICNIC AREA	
	PARKING LOT	
	WATER FOUNTAIN	
	DYKE MARSH HIKING TRAIL	
	TELEPHONE	
	OTHER Please describe:	

On the list below, please check on the left the facilities that you and your group used at Belle Haven Park and Dyke Marsh Wildlife Preserve $\underline{\text{this}}$ $\underline{\text{visit}}$. Please check () $\underline{\text{all}}$ that apply.

3.

4.	a)	during this	ck () the services which you and you visit to Belle Haven Park/Dyke Marsh nn on the left.	ur grou Wildlif	p use e Pres	d serve
	b)	Next, for or please rate	nly those services which you and you their quality from 1-5.	r group	usec	d,
		Use servic	ce?		Qua	lity?
		Check ()		Very good 1 2		Very poor
			SAILING SCHOOL			
			BOAT RENTAL			
			BIRD WALKS			
			PARK STAFF			
			BULLETIN BOARD			
			DYKE MARSH BIRD BROCHU	RE		
			BAIT SALES			
			OTHER (Please describe)			

5.	How much time did you and your group spend at Belle Haven Park/ Dyke Marsh Wildlife Preserve this visit?
	NUMBER OF HOURS AND _ MINUTES
6.	How many people were in your group?
	NUMBER OF PEOPLE
7.	What kind of group were you with? Please check () one.
	ALONE
	FAMILY
	FRIENDS
	FAMILY AND FRIENDS
	ORGANIZED GROUP (Such as youth groups, church groups, senior groups, tours etc.)
	OTHER (Please describe:)
	PLEASE GO ON TO NEXT PAGE

8. For you and your group, please indicate:

	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	# TIMES VISITED (INCLUDING THIS VISIT)
YOURSELF			
MEMBER #2			
MEMBER #3			
MEMBER #4			
MEMBER #5			
MEMBER #6			
MEMBER #7			

in <u>past visits</u>	on the right the activities that you and your g at Belle Haven Park and Dyke Marsh Wild k () <u>al</u> l that apply.	roup have us life Preserve
This visit ()	(Past visits
	BIKING	
	WALKING	
	ROLLERSKATING	
	ROLLERBLADING	
	JOGGING	
	FISHING	
	PICNICKING	
	MOTOR BOATING	
	SAILING/CANOEING	
	WILDLIFE OBSERVATION	
	ENJOYING WATERFRONT VIEWS	
	ENJOYING NATURE	
	SPORTS	
	WALKING PETS	
	COMMUTING TO WORK OR HOME	
	OTHER Please describe:	

9.

PLEASE GO ON TO NEXT PAGE



	NO- (PLEASE GO ON TO QUESTION 11)
	
	YES
ļ	How ? (Please explain.)
-	
-	
	What did you like <u>most</u> about your visit to Belle Haven Park and Dyke Marsh Wildlife Preserve?
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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
Department of Forest Resources
College of Forestry, Wildlife and
Range Sciences
University of Idaho
Moscow, Idaho 83844-1133