

# **Canyon de Chelly Visitor Study**

**The  
Visitor Services  
Project**



**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 authorize 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 the Service Information Collection Clearance Officer, National Monument Service, P.O. Box 37127, Washington, D.C. 20013-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0090, Washington, D.C. 20503.

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## YOU AND YOUR OPINIONS

1. Prior to your visit, how did you and your group get information about Canyon de Chelly National Monument? Please check (✓) **all** that apply.

\_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**

\_\_\_\_\_ TRAVEL GUIDES/TOUR BOOKS

\_\_\_\_\_ MAPS OR BROCHURES

\_\_\_\_\_ FRIENDS OR RELATIVES

\_\_\_\_\_ PREVIOUS VISITS

\_\_\_\_\_ TELEPHONE INQUIRY TO PARK

\_\_\_\_\_ WRITTEN INQUIRY TO THE PARK

\_\_\_\_\_ NEWSPAPER/MAGAZINES

\_\_\_\_\_ TELEVISION/RADIO

\_\_\_\_\_ NAVAJO TRIBAL TOURISM OFFICE

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

2. On this visit, what were your reasons for visiting Canyon de Chelly National Monument? Please check (✓) **all** that apply.

\_\_\_\_\_ LEARN ABOUT INDIAN CULTURE

\_\_\_\_\_ SCENIC BEAUTY

\_\_\_\_\_ VIEW ARCHEOLOGICAL/CULTURAL SITES

\_\_\_\_\_ RECREATION (hike, take photographs, take tour, etc.)

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

3. On this visit, how much time did you and your group spend in Canyon de Chelly National Monument?

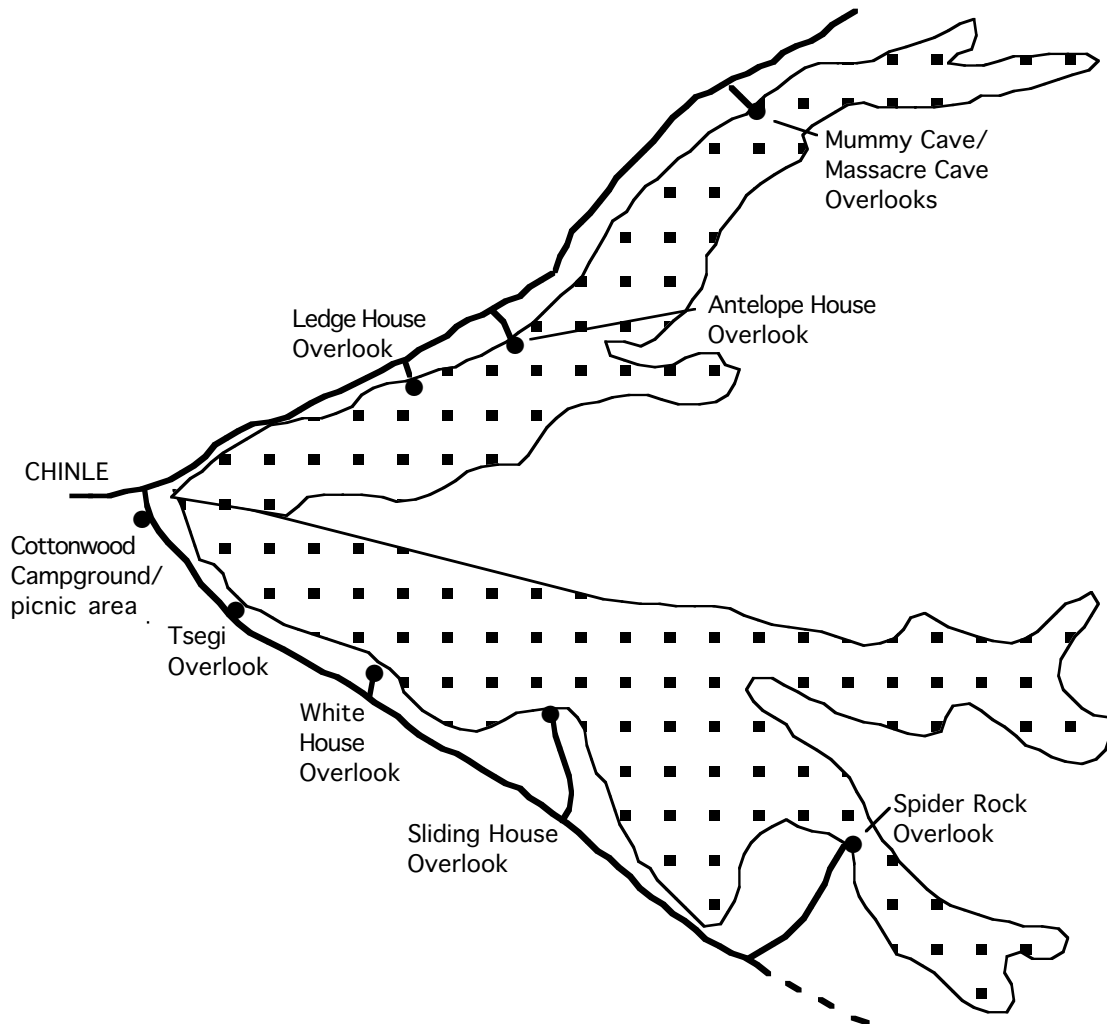
If **less** than 24 hours: \_\_\_\_\_ NUMBER OF HOURS

If 24 hours **or more**: \_\_\_\_\_ NUMBER OF DAYS

## VISITING CANYON DE CHELLY

4. On the list below, please indicate the **order** in which you and your group visited these sites at Canyon de Chelly National Monument during this trip. Simply write 1, 2, 3, and so forth, in the blank beside each place you visited. Do not mark any sites you did not visit. The map below will aid you in locating the sites.

- |  |  |
|--|--|
| <p># _____ TSEGI CANYON OVERLOOK</p> <p>_____ WHITE HOUSE OVERLOOK</p> <p>_____ SLIDING HOUSE OVERLOOK</p> <p>_____ SPIDER ROCK OVERLOOK</p> | <p># _____ LEDGE HOUSE OVERLOOK</p> <p>_____ ANTELOPE HOUSE OVERLOOK</p> <p>_____ MUMMY CAVE/MASSACRE CAVE OVERLOOK</p> <p>_____ COTTONWOOD CAMPGROUND/PICNIC AREA</p> |
|--|--|



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## YOUR ACTIVITIES

5. On the list below, please check all of the activities that you and your group participated in at Canyon de Chelly National Monument during this visit. Please check (✓) **all** that apply.

\_\_\_\_\_ STOP AT SCENIC OVERLOOKS

\_\_\_\_\_ HIKE WHITE HOUSE TRAIL

\_\_\_\_\_ VIEW ARCHEOLOGICAL SITES

\_\_\_\_\_ ATTEND RANGER-LED ACTIVITIES

\_\_\_\_\_ NAVAJO-GUIDED HIKE

\_\_\_\_\_ NAVAJO-GUIDED 4-WHEEL DRIVE TOUR

\_\_\_\_\_ TRUCK TOUR

\_\_\_\_\_ HORSEBACK TOUR

\_\_\_\_\_ SHOP FOR NAVAJO ARTS AND CRAFTS

\_\_\_\_\_ EXPERIENCE NAVAJO CULTURE

\_\_\_\_\_ SPIRITUAL/RELIGIOUS EXPERIENCE

\_\_\_\_\_ CAMP

\_\_\_\_\_ OVERNIGHT BACKPACK

\_\_\_\_\_ PICNIC

\_\_\_\_\_ PHOTOGRAPHY

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

## YOU AND YOUR OPINIONS

6. How many people were in your group?

\_\_\_\_\_ NUMBER OF PEOPLE

7. What kind of group were you with? Please check (√) only **one**.

\_\_\_\_\_ ALONE

\_\_\_\_\_ FAMILY

\_\_\_\_\_ FRIENDS

\_\_\_\_\_ FAMILY AND FRIENDS

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

8. Were you with a guided tour group?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

9. For you and your group, please indicate:

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

10. a) All of the land in Canyon de Chelly National Monument belongs to the Navajo tribe. Navajo people live in the canyon and access is limited for visitors. Do you think access should be limited?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

\_\_\_\_\_ DON'T KNOW - **GO ON TO  
QUESTION 11**

b) Why or why not? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE GO ON TO NEXT PAGE**



11. a) Please check (√) the interpretive services or facilities which you and your group **used** during this visit to Canyon de Chelly National Monument.
- b) Next, for only those services and facilities which you and 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 service? Check (√)	Importance?					Quality?				
	Very important		Not important			Very good		Very poor		
	1	2	3	4	5	1	2	3	4	5
___ PARK BROCHURE/MAP										
___ PARK NEWSPAPER ( <i>Canyon Overlook</i> )										
___ VISITOR CENTER EXHIBITS										
___ VISITOR CENTER SALES PUBLICATIONS										
___ VISITOR CENTER VIDEO										
___ VISITOR CENTER PERSONNEL										
___ ASSISTANCE FROM PARK EMPLOYEES										
___ RANGER-LED PROGRAMS										
___ BULLETIN BOARDS										
___ ROADSIDE OVERLOOK EXHIBITS										
___ SELF-GUIDED TRAILS/RIM DRIVES										
___ VISITOR CENTER ARTS & CRAFTS DEMONSTRATIONS										
___ ARTS & CRAFTS VENDORS (other than visitor center area)										
___ PRIVATE GUIDES										



12. a) Please check (√) the visitor services and facilities which you and your group **used** during this visit to Canyon de Chelly National Monument.
- b) Next, for only those services and facilities which you and 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 service? Check (√)	Importance?					Quality?				
	Very important		Not important			Very good		Very poor		
	1	2	3	4	5	1	2	3	4	5
___ RESTROOMS										
___ HANDICAPPED ACCESS										
___ CAMPGROUND/PICNIC AREAS										
___ GARBAGE DISPOSAL/RECYCLING										
___ DUMP STATION										
___ HIGHWAY DIRECTIONAL SIGNS										
___ BACKCOUNTRY TRAILS										
___ EMERGENCY SERVICES										
___ HORSEBACK RIDES										
___ THUNDERBIRD TRUCK TOURS										
___ THUNDERBIRD CAFETERIA										
___ THUNDERBIRD GIFT SHOP										
___ THUNDERBIRD LODGE										
___ CONCESSION PERSONNEL (guides, motel, cafeteria, gift shop)										

PLEASE GO ON TO NEXT PAGE



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13. During this visit, how much money did you and your group spend on lodging, travel, food, and other items in Canyon de Chelly National Monument and outside the park (within a 1 hour drive of Chinle)? Please write "0" if you did not spend any money.

**IN THE PARK**

**OUTSIDE THE PARK**  
(WITHIN 1 HR. DRIVE OF CHINLE)

\$ _____	LODGING (motel, camping, etc.)	\$ _____
\$ _____	TRAVEL (gas, bus fare, etc.)	\$ _____
\$ _____	FOOD (restaurant, groceries, etc.)	\$ _____
\$ _____	OTHER (recreation, film, gifts, etc.)	\$ _____

14. a) What did you and your group like **most** about your visit to Canyon de Chelly National Monument? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b) What did you and your group like **least** about your visit to Canyon de Chelly National Monument? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Canyon de Chelly National Monument educational programs address a number of topics. How important would each of the following educational topics be to you and your group during a future visit? Please rate each topic from 1 to 5.

**Importance?**

Very important    1   2   3   4   5   Not important

GEOLOGY \_\_\_\_\_

ARCHEOLOGY \_\_\_\_\_

INDIAN CULTURE \_\_\_\_\_

HISTORY \_\_\_\_\_

OTHER (Please specify: \_\_\_\_\_  
\_\_\_\_\_) \_\_\_\_\_

16. In the future, would you be willing to pay an entrance fee to visit Canyon de Chelly National Monument?

\_\_\_\_\_ YES, LIKELY    \_\_\_\_\_ NO, UNLIKELY    \_\_\_\_\_ NO OPINION

17. In the future, additional interpretive services are planned for Canyon de Chelly National Monument. Which of the following would be most useful? Please check (✓) **only one**.

- \_\_\_\_\_ PUBLICATIONS                      \_\_\_\_\_ AUDIO-VISUAL PROGRAMS
- \_\_\_\_\_ CHILDREN'S ACTIVITIES        \_\_\_\_\_ RANGER-LED PROGRAMS
- \_\_\_\_\_ INFORMATION IN NEWSPAPER, ON TELEVISION, RADIO
- \_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

18. If you were a manager planning for the future of Canyon de Chelly National Monument, what would you propose? Please be specific.

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19. Is there anything else you and your group would like to tell us about your visit to Canyon de Chelly National Monument and the surrounding area?

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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.

STAMP

**OFFICIAL BUSINESS**

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