

# **Bryce Canyon National Park Visitor Study**



**The  
Visitor Services  
Project**

Superintendent letter to go here

**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 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. 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.

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 12 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Office of Information and Regulatory Affairs of OMB, Attention Desk Officer for the Interior Department, Office of Management and Budget, Washington, D.C. 20503; and to the Information Collection Clearance Officer, Audits and Accountability Team, National Park Service, P.O. Box 37127, Washington, D.C. 20013-7127.

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### VISITING BRYCE CANYON NATIONAL PARK

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

- \_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT - **GO ON TO QUESTION 2**
- \_\_\_\_\_ TRAVEL GUIDE/TOUR BOOK
- \_\_\_\_\_ NEWSPAPER/MAGAZINE ARTICLES
- \_\_\_\_\_ MAPS
- \_\_\_\_\_ FRIENDS OR RELATIVES
- \_\_\_\_\_ PREVIOUS VISIT(S)
- \_\_\_\_\_ TELEPHONE INQUIRY TO THE PARK
- \_\_\_\_\_ WRITTEN INQUIRY TO THE PARK
- \_\_\_\_\_ HIGHWAY SIGNS
- \_\_\_\_\_ INTERNET/WORLD WIDE WEB
- \_\_\_\_\_ E-MAIL TO THE PARK
- \_\_\_\_\_ TRAVEL AGENT
- \_\_\_\_\_ CONCESSION RESERVATIONS OFFICE
- \_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

2. a) Where did you and your group spend the night **before you arrived** at Bryce Canyon National Park?

\_\_\_\_\_ NEAREST TOWN

\_\_\_\_\_ STATE

- b) Where do you and your group plan to spend the night **when you leave** Bryce Canyon National Park?

\_\_\_\_\_ NEAREST TOWN

\_\_\_\_\_ STATE

3. a) On this trip, how much time did you and your group spend outside the park but in the Bryce Canyon National Park **area** (within 50 miles of the park, including Panguitch, Escalante, Tropic, etc.)?

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

If 24 hours or **more**: \_\_\_\_\_ NUMBER OF DAYS  
(Please list partial days as 1/4, 1/2, etc.)

- b) On this trip, how much time did you and your group spend **in** Bryce Canyon National Park?

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

If 24 hours or **more**: \_\_\_\_\_ NUMBER OF DAYS  
(Please list partial days as 1/4, 1/2, etc.)

4. On the list below, please check (✓) **all** of the activities that you and your group participated in during this trip to Bryce Canyon National Park.

\_\_\_\_\_ CAMP AT DEVELOPED CAMPGROUND

\_\_\_\_\_ CAMP AT BACKCOUNTRY CAMPSITE

\_\_\_\_\_ VISIT VISITOR CENTER

\_\_\_\_\_ PURCHASED ITEMS AT VISITOR CENTER

\_\_\_\_\_ VISIT LODGE

\_\_\_\_\_ AUTO TOUR WITH ONLY SHORT WALKS TO VIEWPOINTS

\_\_\_\_\_ HIKE

\_\_\_\_\_ ATTEND RANGER/VOLUNTEER-LED ACTIVITY  
(Interpretive talks, guided walks, etc.)

\_\_\_\_\_ HORSEBACK RIDE

\_\_\_\_\_ BICYCLE

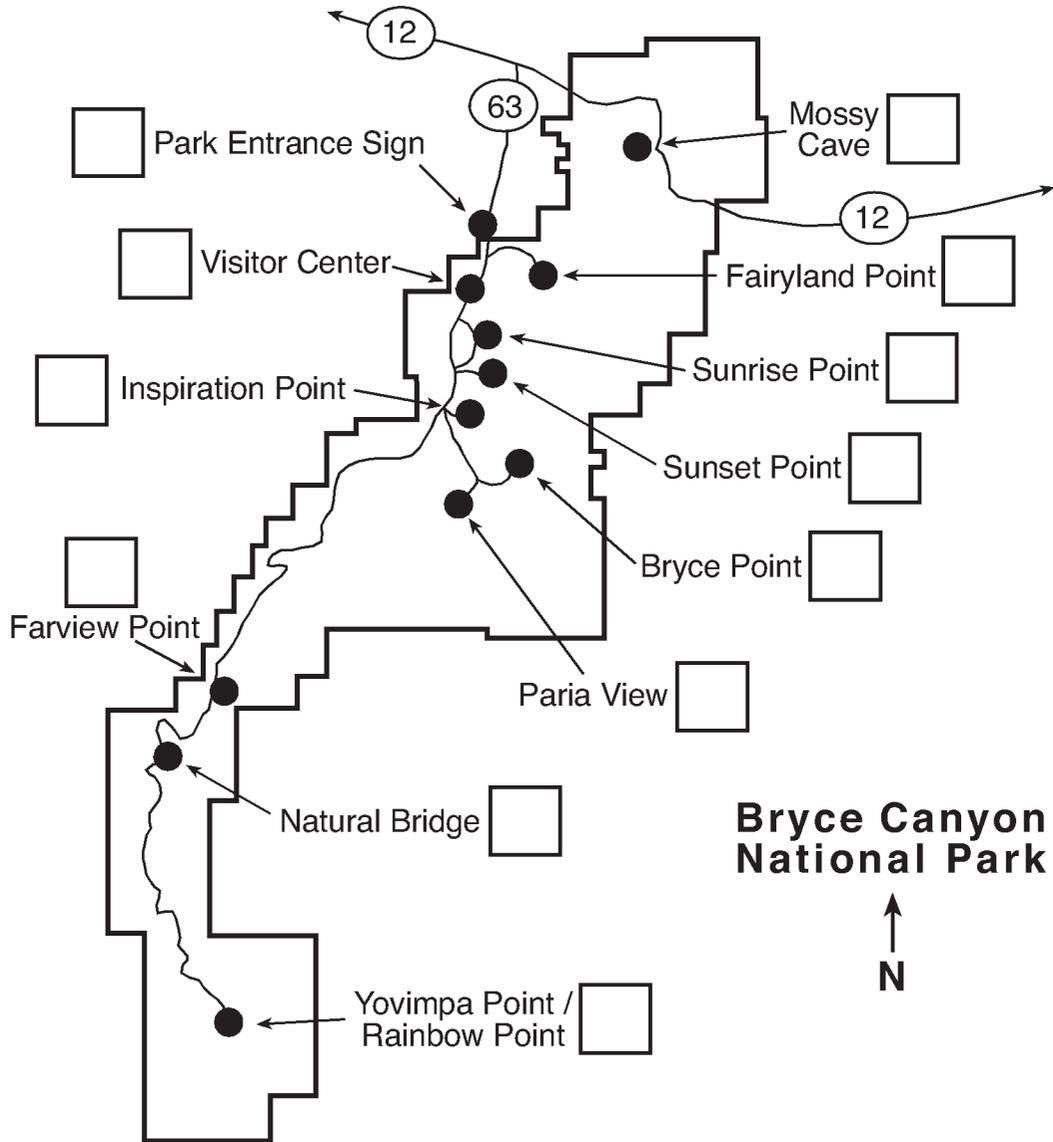
\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

PLEASE GO ON TO NEXT PAGE



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5. On the map below, please mark the order in which you and your group visited sites at Bryce Canyon National Park **during this visit**. Simply write 1 (for first site visited), 2 (for second site visited), and so forth in the boxes beside the sites on the map. If you did not visit a site, please leave the box blank.



6. On this visit, did you and your group hike at Bryce Canyon National Park?

YES  NO - **GO ON TO QUESTION 7**

If YES, please indicate what type of hiking you participated in. Please check (✓) **all** that apply.

HIKED ABOVE CANYON RIM

HIKED INTO CANYON BELOW THE RIM

TOOK HIKE THAT WAS SHORTER THAN 2 HOURS

TOOK HIKE THAT WAS FROM 2 TO 4 HOURS LONG

TOOK HIKE THAT WAS LONGER THAN 4 HOURS

### YOU AND YOUR OPINIONS

7. On this visit, how many people were in your **immediate** group, including yourself?

NUMBER OF PEOPLE

8. a) On this visit, were you with a guided tour group?

YES  NO - **GO ON TO QUESTION 9**

b) If YES, how many people were in the guided tour group?

NUMBER OF PEOPLE

9. On this visit, what kind of group were you with? Please check (✓) only **one**.

ALONE

FAMILY

FRIENDS

FAMILY AND FRIENDS

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

**PLEASE GO ON TO NEXT PAGE**



10. For you and each member of your group on this visit, please indicate:

	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	NUMBER OF VISITS MADE TO THIS PARK (INCLUDING THIS VISIT)	
			PAST 12 MONTHS	PAST 5 YEARS
YOURSELF	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____

11. a) When you and your group visit national parks, do you ever attend ranger/volunteer-led activities (i.e. guided walks and/or talks)?

\_\_\_\_\_ NO, NEVER - **GO ON TO QUESTION 12**

\_\_\_\_\_ YES, AT LEAST OCCASIONALLY

b) If YES, please indicate your preferred times to attend such activities at Bryce Canyon National Park. Please suggest **two** time periods by writing in the hours and circling AM or PM.

From \_\_\_\_\_ AM or PM To \_\_\_\_\_ AM or PM

From \_\_\_\_\_ AM or PM To \_\_\_\_\_ AM or PM

12. Bryce Canyon National Park programs and exhibits address a variety of subjects. What subjects would you like to learn about on a future visit to the park?

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13. a) Please check (✓) the information services which you or your group **used** at Bryce Canyon National Park during this visit.
- b) Next, for only those services which you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services which you or your group used, please rate their **quality** from 1-5.

a) Used service in Bryce Canyon NP?	b) If used, how important?					c) If used, what quality?				
	Not important		Extremely important			Very poor		Very good		
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ PARK BROCHURE/MAP										
_____ PARK NEWSPAPER ( <i>Hoodoo</i> )										
_____ VISITOR CENTER STAFF										
_____ VISITOR CENTER SALES PUBLICATIONS										
_____ VISITOR CENTER EXHIBITS										
_____ VISITOR CENTER SLIDE SHOW										
_____ RANGER/VOLUNTEER-LED PROGRAMS										
_____ SELF-GUIDED NATURE TRAILS										
_____ ROADSIDE EXHIBITS										
_____ BULLETIN BOARDS										
_____ SAFETY INFORMATION BROCHURES										
_____ OTHER INFORMATIONAL BROCHURES										
_____ EMERGENCY SERVICES										
_____ JUNIOR RANGER PROGRAM										
_____ PARK RADIO STATION - 1610 AM (Near park entrance)										

PLEASE GO ON TO NEXT PAGE





15. a) Which of the following park qualities were **reasons** for this visit to Bryce Canyon National Park? Please check (✓) **all** that apply.
- b) Next, for only those park qualities that you indicated were reasons for this visit, please rate their relative **importance** from 1-5.
- c) Finally, for only those park qualities that you indicated were reasons for this visit, please rate how **satisfied** you were from 1-5.

a) Reason for visiting Bryce Canyon NP?	b) How important?					c) How satisfied?				
	Not important		Extremely important			Not satisfied		Extremely satisfied		
Check (✓)	1	2	3	4	5	1	2	3	4	5
_____ SCENERY										
_____ RECREATION OPPORTUNITIES IN PARK (hiking, photography, bicycling, etc.)										
_____ OTHER RECREATION OPPORTUNITIES IN AREA										
_____ EDUCATIONAL OPPORTUNITIES										
_____ SOLITUDE										
_____ QUIET										
_____ WILDERNESS ENVIRONMENT/ OPEN SPACE										
_____ BACKCOUNTRY CAMPING										
_____ VIEW WILDLIFE										
_____ VISIBILITY (distance and clarity of view)										

16. Did anything detract from your enjoyment of any of the above features or qualities?

\_\_\_\_\_ YES    \_\_\_\_\_ NO - **GO ON TO QUESTION 17**

If YES, how? Please explain: \_\_\_\_\_

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17. For you and all the **adults** in your group on this visit, please indicate the current income level. Please circle only **one** for each person.

	CURRENT INCOME LEVEL				
	LESS THAN \$10,000	\$10,001- \$20,000	\$20,001- \$30,000	\$30,001- \$40,000	\$40,001 OR MORE
YOURSELF	1	2	3	4	5
ADULT #2	1	2	3	4	5
ADULT #3	1	2	3	4	5
ADULT #4	1	2	3	4	5
ADULT #5	1	2	3	4	5
ADULT #6	1	2	3	4	5
ADULT #7	1	2	3	4	5

18. For you and all the **adults** in your group on this visit, please indicate the highest level of education received. Please circle only **one** for each person.

	HIGHEST LEVEL OF EDUCATION			
	SOME HS	HS GRAD	BACHELOR DEGREE	GRADUATE DEGREE
YOURSELF	1	2	3	4
ADULT #2	1	2	3	4
ADULT #3	1	2	3	4
ADULT #4	1	2	3	4
ADULT #5	1	2	3	4
ADULT #6	1	2	3	4
ADULT #7	1	2	3	4

19. a) Please list below the subject matter that you would most like to have available for purchase in the visitor center bookstore on a future visit to Bryce Canyon National Park.

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- b) Please list below the types of items (e.g. books, video tapes, etc.) that you would most like to have available for purchase in the visitor center bookstore on a future visit to Bryce Canyon National Park.

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20. a) On the list below, please indicate each of the fees you or a member of your group paid in Bryce Canyon National Park during this visit. Please check (✓) all that apply.
- b) Next, for only those fees that you paid, please indicate how appropriate you felt the amount of the fee was.

**a) Check (✓) fees paid**

**b) How appropriate?**

	Too high	About right	Too low
_____ ENTRY BY PASS (Golden Eagle/Age/Access Pass or Annual Park Pass)	1	2	3
_____ 7-DAY ENTRANCE FEE	1	2	3
_____ DISCOUNT CAMPING FEE (using Golden Age Pass or Golden Access Pass)	1	2	3
_____ CAMPING FEE (individual site)	1	2	3
_____ GROUP CAMPING FEE	1	2	3
_____ DUMP STATION FEE	1	2	3
_____ BACKCOUNTRY PERMIT FEE	1	2	3

21. If it would increase funds to operate Bryce Canyon National Park, would you be willing to pay modest fees for the following services? These fees would **NOT** be included in the normal park entrance fee. For each type of fee listed below, please circle YES or NO to indicate your willingness to pay the fee. If willing to pay the fee, please circle the **one** price range that you feel is most appropriate.

Type of fee	Willing to pay?	Appropriate amount?		
INTERPRETIVE RANGER PROGRAM FEE (per person)	YES / NO	\$1-3	\$4-6	\$7-10
SHUTTLE BUS SERVICE FEE (per person)	YES / NO	\$1-3	\$4-6	\$7-10
PRIVATE VEHICLE PARKING FEE (per vehicle)	YES / NO	\$1-3	\$4-6	\$7-10

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22. During this trip, how much money did you and your group spend in Bryce Canyon National Park and in the Bryce Canyon National Park **area** (within 50 miles of the park including Panguitch, Escalante, Tropic, etc.)? Please write "0" if your group did not spend any money.

Local residents should only include expenditures that were **directly related** to this visit to the park.

\$\_\_\_\_\_ LODGING (motel, campsite, etc.)

\$\_\_\_\_\_ TRAVEL (gas, bus fare, etc.)

\$\_\_\_\_\_ FOOD (restaurant, groceries, etc.)

\$\_\_\_\_\_ OTHER (recreation, film, gifts, etc.)

23. a) During this visit to Bryce Canyon National Park, did you and your group feel crowded by **either** people or vehicles?

\_\_\_\_\_ YES      \_\_\_\_\_ NO - **GO ON TO QUESTION 24**

- b) If YES, please use the scale below to rate (from 1 to 5) how crowded you and your group felt by people or vehicles during this visit.

<b>How crowded?</b>	<u>Not at all crowded</u>			<u>Extremely crowded</u>	
PEOPLE	1	2	3	4	5
VEHICLES	1	2	3	4	5

- c) Where in Bryce Canyon National Park were you when you felt crowded? Please be as specific as possible.

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- d) What time of day was it when you felt crowded? Please circle **all** that apply.

MORNING  
(Before noon)

AFTERNOON  
(Noon-6pm)

EVENING  
(After 6pm)

24. If the number of passenger vehicles entering Bryce Canyon National Park in the future must be limited due to vehicle congestion, which of the following alternatives for entering the park would you find most acceptable? Please check (✓) only **one**.

- FIRST COME, FIRST SERVED UNTIL A DAILY LIMIT IS REACHED
- USE A RESERVATION SYSTEM
- USE A SHUTTLE SYSTEM
- OTHER (Please specify: \_\_\_\_\_)

25. Overall, how would you rate the quality of the visitor services provided to you and your group at Bryce Canyon National Park during this visit? Please circle only **one**.

VERY GOOD      GOOD      AVERAGE      POOR      VERY POOR

26. If you were a manager planning for the future of Bryce Canyon National Park, what would you propose? Please be specific.

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27. Is there anything else you and your group would like to tell us about your visit to Bryce Canyon National Park?

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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.



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