



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

Visitor Services Project

Yosemite National Park Visitor Study



OMB Approval 1024-0224 (NPS #05-059)
Expiration Date: 01/31/2006



IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE
Yosemite National Park
P.O. Box 700
El Portal, CA 95318

July, 2005

Dear Visitor:

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

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.

When your visit is over, please complete the questionnaire, seal it with the stickers provided on the last page, and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, NPS VSP Coordinator, 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,

A handwritten signature in black ink, appearing to read "Michael Tollefson".

Michael Tollefson
Superintendent

DIRECTIONS

One person, at least 16 years of age, in your personal group should complete the questionnaire. It should take about 20 minutes. When you have completed the questionnaire, please seal it with the stickers provided and drop it in any U.S. mailbox. We appreciate your help.

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

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. 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 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

Please go on to the next page →

Your Visit to Yosemite National Park

1. a) Prior to your visit, how did you and your group obtain information about Yosemite National Park (NP)? Please check () **all** that apply.

_____ Received no information prior to visit → **Go on to Question 2**

_____ Previous visits

_____ Friends/relatives/word of mouth

_____ Travel guides/tour books

_____ Maps/brochures

_____ Videos/television/radio programs

_____ Newspaper/magazine articles

_____ Telephone/email/written inquiry to park

_____ Park website: www.nps.gov/yose/

_____ Other websites

_____ Other National Park Service site

_____ State welcome center

_____ Chamber of Commerce

_____ School/college/university class/program

_____ Other (Please specify: _____)

- b) From the sources checked above, did you and your group receive the type of information about the park that you needed?

_____ No _____ Yes _____ Not sure

↓ ↓ ↓

↓ **Go on to Question 2**

- c) If NO, what type of park information did you and your group need that was not available? Please be specific.
- _____

2. a) Prior to your visit, were you and members of your group aware of bear safety issues at Yosemite NP?

_____ Yes _____ No

- b) During your visit, did you and your group learn about bear safety issues from talking with rangers, brochures, exhibits, or by other means?

_____ Yes _____ No

3. a) Prior to your visit, who in your group made the decision to visit Yosemite NP? Please check (√) **all** that apply.

_____ Male head of household

_____ Female head of household

_____ Tour director

_____ Other (Please specify: _____)

- b) When did you and your group make the decision to visit Yosemite NP? Please check (√) **only one**.

_____ After seeing highway signs

_____ After arriving in Yosemite NP area (within 50 miles of the park)

_____ Less than 1 month ago

_____ 2-6 months ago

_____ 7-11 months ago

_____ 1 year ago or more

4. On this trip, what was your **primary** reason for visiting the Yosemite NP area (within 50 miles of the park)? Please check (√) **only one**.

_____ Visit Yosemite NP

_____ Visit other area attractions

_____ Visit friends/relatives in the area

_____ Business

_____ Other (Please specify: _____)

5. a) In some parks such as Yosemite NP, the National Park Service follows a prescribed burn policy. This policy involves setting fires under specific weather and fire conditions to reduce the buildup of undergrowth and help prevent catastrophic fires. Prior to this visit to Yosemite NP, were you aware of this burn policy?

_____ Yes

_____ No

_____ Not sure

- b) Would you and your group be willing to tolerate short periods (up to 2 days) of smoke or reduced visibility during a future visit to Yosemite NP?

_____ Yes

_____ No

_____ Not sure

Please go on to the next page →

6. a) On this trip, did you and your group stay overnight away from home in Yosemite NP and/or the area (within 50 miles of the park)?

_____ Yes _____ No → **Go on to Question 7**



- b) Please list the number of nights you and your group stayed.

_____ Number of nights in Yosemite NP

_____ Number of nights in Yosemite NP area (within 50 miles of the park)

- c) In what type of lodging did you and your group spend the night(s)? Please check () **all** that apply.

Inside park ()

Outside park in surrounding area ()

_____ Lodge, motel, cabin, rented condo/home, or bed & breakfast _____

_____ RV/trailer camping _____

_____ Tent camping in developed campground _____

_____ Backcountry campsite _____

_____ Personal seasonal residence _____

_____ Residence of friends or relatives _____

_____ Other (Please specify: _____) _____

7. a) On this trip, where did you and your group stay on the night prior to visiting Yosemite NP?

Nearest city/town: _____ State: _____

- b) Where did you stay on the night after leaving Yosemite NP?

Nearest city/town: _____ State: _____

8. a) How long did you and your group stay at Yosemite NP? Please list partial hours and days as 1/4, 1/2, or 3/4.

_____ Number of hours **if less than 24 hours**

_____ Number of days **if 24 hours or more**

- b) How long did you and your group stay in the Yosemite NP **area** (within 50 miles of the park)? Please list partial hours and days as 1/4, 1/2, or 3/4.

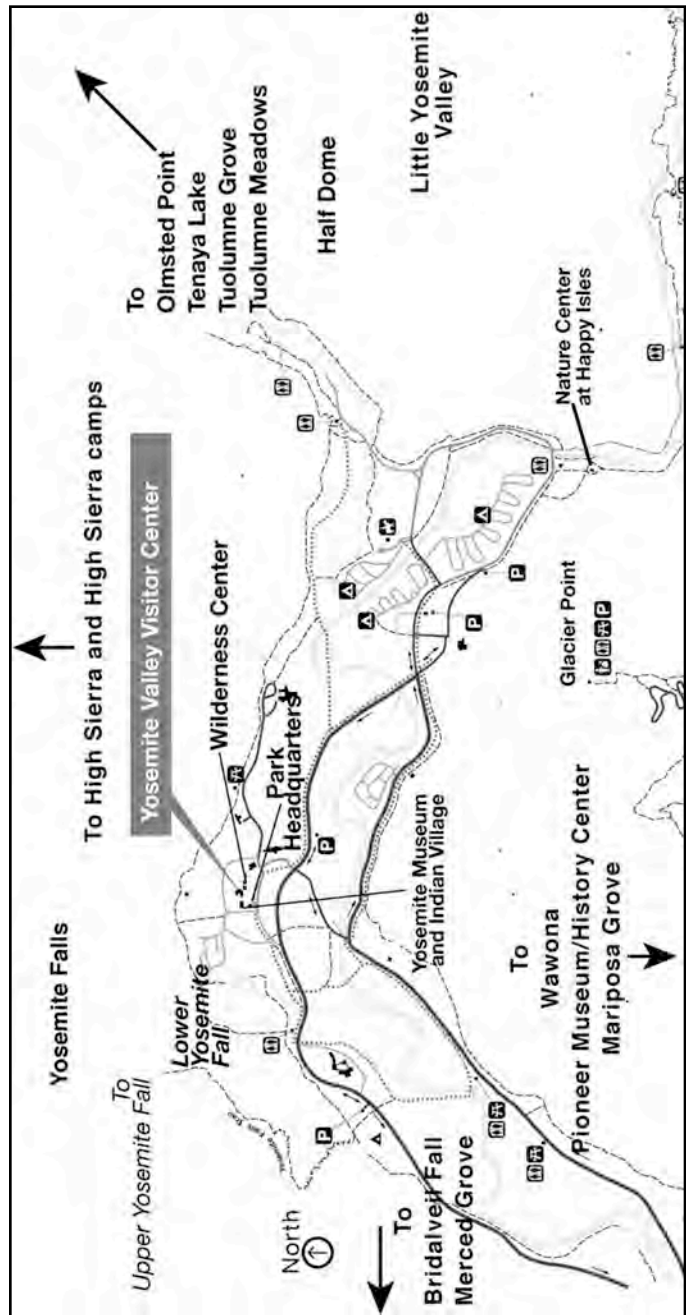
_____ Number of hours **if less than 24 hours**

_____ Number of days **if 24 hours or more**

9. For this visit, please list the order (#1, 2, 3, etc.) in which you and your group visited the following sites at Yosemite NP. If you did not visit a site, please leave that line blank. Use the map below to help you locate the sites you visited.

Order visited (#1, 2, 3, etc.)

- _____ Bridalveil Fall
- _____ Half Dome
- _____ Happy Isles
- _____ High Sierra
- _____ High Sierra camps
- _____ Indian Cultural Museum
- _____ Little Yosemite Valley
- _____ Mariposa Grove
- _____ Merced Grove
- _____ Olmsted Point
- _____ Pioneer Museum/
History Center
- _____ Tenaya Lake
- _____ Tuolumne Grove
- _____ Tuolumne Meadows
- _____ Visitor Center (Valley)
- _____ Wawona
- _____ Yosemite Falls
- _____ Other (Please specify: _____)



Please go on to the next page →

10. a) For this visit, what activities did you and your group participate in at Yosemite NP? Please check () **all** that apply.

- _____ Sightsee/take a scenic drive
- _____ View wildlife/birdwatching
- _____ Paint/draw/take photographs
- _____ View roadside/trailside exhibits
- _____ Day hike
- _____ Climbing
- _____ Attend ranger-led programs
- _____ Visit visitor center
- _____ Visit museum
- _____ Shop in park bookstore
- _____ Shop in park (other than park bookstore)
- _____ Eat in park restaurant
- _____ Picnic
- _____ Camp in developed campground
- _____ Stay in park lodging
- _____ Overnight backpack
- _____ Other (Please specify:_____)

b) Which one of the above activities was the **primary** reason you visited Yosemite NP on this visit? Please list **only one** response.

11. On this visit, what forms of transportation did you and your group use to arrive at Yosemite NP? Please check () **all** that apply.

- _____ Private vehicle (car, SUV, pickup, RV, motorcycle, etc.)
- _____ Rental vehicle (any type) _____ Bicycle
- _____ Commercial tour bus _____ Walk
- _____ Other (Please specify:_____)

12. a) Please check () **all** of the information services and facilities that you and your group used during this visit to Yosemite NP.
- b) Next, for **only** those services and facilities that you and your group used, please rate their importance from 1-5.
- c) Finally, for **only** those services and facilities that you and your group used, please rate their quality from 1-5.

a) Used service/facility?	b) If used, how important?	c) If used, what quality?
Check ()	1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	1=Very poor 2=Poor 3=Average 4=Good 5=Very good
_____ Park brochure/map	_____	_____
_____ Yosemite Guide (booklet distributed at park entrance)	_____	_____
_____ Trail guides	_____	_____
_____ Sales items at park bookstore	_____	_____
_____ Assistance from park staff	_____	_____
_____ Ranger-led walks/talks	_____	_____
_____ Ranger-led campground programs	_____	_____
_____ Junior Ranger program	_____	_____
_____ Museum exhibits	_____	_____
_____ Roadside exhibits	_____	_____
_____ Trailside exhibits	_____	_____
_____ Park website: www.nps.gov/yose/ used before or during visit	_____	_____
_____ Access for disabled persons	_____	_____
_____ Shuttle bus service	_____	_____

Please go on to the next page →

13. a) Please check () **all** of the visitor and concession services and facilities that you and your group used during this visit to Yosemite NP.
- b) Next, for **only** those services and facilities that you and your group used, please rate their importance from 1-5.
- c) Finally, for **only** those services and facilities that you and your group used, please rate their quality from 1-5.

a) Use service/facility?	b) If used, how important?	c) If used, what quality?
Check ()	1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	1=Very poor 2=Poor 3=Average 4=Good 5=Very good
_____ Directional signs (in park)	_____	_____
_____ Directional signs (outside park)	_____	_____
_____ Roads	_____	_____
_____ Trails	_____	_____
_____ Restrooms	_____	_____
_____ Campgrounds	_____	_____
_____ Picnic areas	_____	_____
_____ Trash collection	_____	_____
_____ Recycling	_____	_____
_____ Parking	_____	_____
_____ In-park lodging	_____	_____
_____ In-park restaurants	_____	_____
_____ In-park gift shops	_____	_____
_____ Showers	_____	_____
_____ Laundromat	_____	_____

14. Overall, how would you and your group rate the quality of the facilities, services, and recreational opportunities provided to you and your group at Yosemite NP during this visit? Please circle **only one**.

Very poor Poor Average Good Very good

15. On this visit, how would you and your group rate the value for entrance fee you paid? Please circle **only one**.

Very poor Poor Average Good Very good

16. On this visit, were you and your personal group with the following types of groups?

a) Guided tour group _____ Yes _____ No

b) School/educational group _____ Yes _____ No

c) Wedding/reunion _____ Yes _____ No

17. On this visit, what kind of personal group (not guided tour/educational group) were you with? Please check () **only one**.

_____ Alone _____ Friends

_____ Family _____ Family and friends

_____ Other (Please specify: _____)

18. a) On this visit, how many people were in your personal group, including yourself?

_____ Number of people

b) On this visit, how many vehicles did you and your group use to enter the park?

_____ Number of vehicles

19. For you and your group, please indicate:

	Gender M=male F=female	Current age	U.S. Zip Code or name of country other than U.S.	Number of visits made to this park (including this visit) past 12 months lifetime	
Yourself	_____	_____	_____	_____	_____
Member #2	_____	_____	_____	_____	_____
Member #3	_____	_____	_____	_____	_____
Member #4	_____	_____	_____	_____	_____
Member #5	_____	_____	_____	_____	_____
Member #6	_____	_____	_____	_____	_____
Member #7	_____	_____	_____	_____	_____

20. a) For you only, are you Hispanic or Latino?

_____ Yes _____ No

Please go on to the next page →

b) For you only, which of these categories best describes your race? Please check () **all** that apply.

- American Indian or Alaska Native
- Asian → **Go on to Part c of this Question**
- Black or African American
- Native Hawaiian or other Pacific Islander
- White

c) If you are of Asian race, please check () which of these categories best describes your race. Please check () **all** that apply.

- Asian Indian
- Chinese
- Filipino
- Other Asian (Please specify: _____)
- Japanese
- Korean
- Vietnamese

21. For you and each of the members (age 16 or over) in your personal group on this visit, please indicate the highest level of education completed. Please check () **only one** for each person.

	Highest level of education				
	Some High School	High School diploma/GED	Some College	Bachelor's Degree	Graduate Degree
Yourself	_____	_____	_____	_____	_____
Member #2	_____	_____	_____	_____	_____
Member #3	_____	_____	_____	_____	_____
Member #4	_____	_____	_____	_____	_____
Member #5	_____	_____	_____	_____	_____
Member #6	_____	_____	_____	_____	_____
Member #7	_____	_____	_____	_____	_____

22. a) What is the **one** language you and/or members of your group prefer to use for the following?

Speaking?	Reading?
_____	_____

b) What services in the park would you like to have provided in languages other than English?

None → **Go on to Question 23**

Services that need translated: _____

c) If translation methods (such as brochures, audio, etc.) were provided for translating indoor and outdoor exhibits in the future, would you and your group be likely to use them?

Yes, likely No unlikely Not sure

23. a) On this visit, did anyone in your group have any disabilities/impairments that limited their ability to visit/enjoy Yosemite NP?

Yes No → **Go on to Question 24**



b) If YES, what kind of disability/impairment? Please check () **all** that apply.

- Hearing Visual
 Mobility Learning
 Mental Other (Specify: _____)

c) Because of the disability/impairment, did you and your group encounter any access/service problems in the park?

Yes No → **Go on to Question 24**



d) If YES, what were the problems? _____

24. a) What was the most important information you and your group learned during this visit to Yosemite NP?

b) How did you and your group learn about the information above on this visit? Please check (√) **all** that apply in the column on the left.

c) On a future visit, what methods would you and your group prefer to use to learn about Yosemite NP? Please check () **all** that apply in the column on the right.

b) This visit (√)	c) Future visit (√)
Not interested in learning → Go on to Question 25	_____
<input type="checkbox"/> Audio-visual programs (videos, movies, slide shows, etc.)	_____
<input type="checkbox"/> Internet websites	_____
<input type="checkbox"/> Travel guides/tour books	_____
<input type="checkbox"/> Other printed materials (books, brochures, maps, park newspaper, etc.)	_____
<input type="checkbox"/> Printed trail guides	_____
<input type="checkbox"/> Ranger-guided walks or programs	_____
<input type="checkbox"/> Roving rangers available to answer questions	_____
<input type="checkbox"/> Indoor exhibits	_____
<input type="checkbox"/> Roadside/trailside exhibits	_____
<input type="checkbox"/> Other (Please specify: _____)	_____

Please go on to the next page →

25. For you and your group, please report all expenditures for the items listed below for this visit to Yosemite NP and the surrounding area (within 50 miles of the park). Please write "0" if no money was spent in a particular category.

a) Please list your group's total expenditures inside Yosemite NP.

b) Please list your group's total expenditures outside the park (within 50 miles).

NOTE: Surrounding area residents should only include expenditures that were **directly related** to this visit to Yosemite NP

	EXPENDITURES	
	a) Inside park	b) Outside park
Hotels, motels, cabins, B&B, 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 (rental cars, taxis, auto repairs, but NOT airfare)	\$ _____	\$ _____
Admission, recreation, entertainment fees	\$ _____	\$ _____
All other purchases (souvenirs, film, books, sporting goods, clothing, etc.)	\$ _____	\$ _____
Donations	\$ _____	\$ _____

c) How many people do the above expenses cover?

_____ Adults (18 years or over)

_____ Children (under 18 years)

26. a) Please rate from 1 to 5 how crowded you and your group felt during this visit to Yosemite NP? Please circle **only one** for each of the following.

Crowding of people

Very crowded 1	Somewhat crowded 2	Neither crowded nor uncrowded 3	Somewhat uncrowded 4	Very uncrowded 5
----------------------	--------------------------	---------------------------------------	----------------------------	------------------------

b) If you rated people crowding as 1 or 2, please list where you felt crowded.

Crowding of vehicles

Very crowded 1	Somewhat crowded 2	Neither crowded nor uncrowded 3	Somewhat uncrowded 4	Very uncrowded 5
----------------------	--------------------------	---------------------------------------	----------------------------	------------------------

b) If you rated vehicle crowding as 1 or 2, please list where you felt crowded.

27. a) On this visit to Yosemite NP, did you and your group ride the park shuttle bus?

Yes No → **Go on to Question 28**



b) If YES, please rate the usefulness of the shuttle bus service.

Not at all useful 1	Somewhat not useful 2	Neither useful nor not useful 3	Very useful 4	Extremely useful 5
---------------------------	-----------------------------	---------------------------------------	---------------------	--------------------------

c) If you rated the shuttle bus system as 1 or 2, please explain: _____

d) On a future visit to Yosemite NP, would you and your group be willing to pay a modest fee (\$2-4/person in addition to the park entrance fee) to ride a shuttle bus to take you between park sites?

Yes, likely No unlikely Not sure

28. If you were a manager planning for the future of Yosemite NP, what would you propose? Please be specific.

29. Is there anything else you and your group would like to tell us about your visit to Yosemite NP?

Thank you for your help! Please seal the questionnaire with the stickers provided and drop it in any U.S. mailbox.

OFFICIAL BUSINESS

**Visitor Services Project
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
Moscow, Idaho 83844-1139**