

Chiricahua National Monument 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 Park Service, P.O. Box 37127, Washington, D.C. 20013-7127; and to the Office of Management and Budget, Paperwork Reduction Project, 1024-0000, Washington, D.C. 20503.

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Visiting Chiricahua National Monument

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

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

____ FORT BOWIE NATIONAL HISTORIC SITE STAFF

____ OTHER NATIONAL PARK AREAS

____ TRAVEL GUIDE/ TOUR BOOK

____ FRIENDS OR RELATIVES

____ PREVIOUS VISIT(S)

____ NEWSPAPER/ MAGAZINE

____ RADIO/ TV/ VIDEOS

____ LOCAL RESIDENT/ BUSINESS

____ CHAMBER OF COMMERCE

____ HIGHWAY SIGNS

____ OTHER (Please specify: _____)

2. On this visit, how much time did you and your group spend at Chiricahua National Monument?

If **less** than 24 hours: _____ NUMBER OF HOURS

If 24 hours or **more**: _____ NUMBER OF DAYS

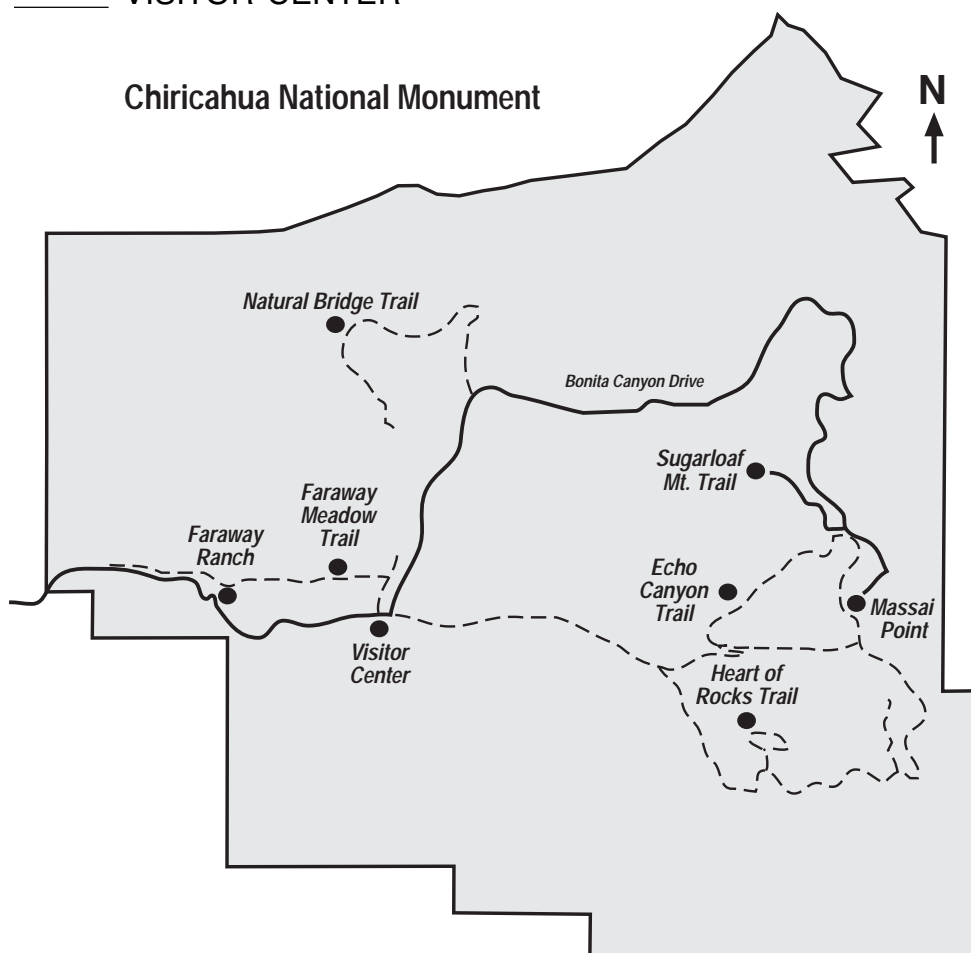
3. On this visit, did you or your group visit Fort Bowie National Historic Site?

____ YES ____ NO - If no, why not? _____

4. On the list below, please mark the **order** in which you and your group visited these sites or hiked these trails in Chiricahua National Monument during this trip. Simply write 1, 2, 3 and so forth, on the line beside each place you visited. Use the map to help you locate the sites.

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

- _____ ECHO CANYON TRAIL
- _____ FARAWAY/ MEADOW TRAIL
- _____ FARAWAY RANCH
- _____ HEART OF ROCKS TRAIL
- _____ MASSAI POINT
- _____ NATURAL BRIDGE TRAIL
- _____ SUGARLOAF MT. TRAIL
- _____ VISITOR CENTER



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5. On the list below, please check (√) **all** of the activities that you and your group participated in at Chiricahua National Monument during this visit.

- _____ TAKE SCENIC DRIVE
- _____ BIRDWATCH
- _____ VIEW WILDLIFE (other than birds)
- _____ WALK/ DAY HIKE
- _____ CAMP
- _____ TAKE FARAWAY RANCH HOUSE TOUR
- _____ PHOTOGRAPHY
- _____ HORSEBACK RIDE
- _____ PICNIC
- _____ OTHER (Please describe: _____)

6. a) On this visit, did you and your group drive a recreational vehicle to Chiricahua National Monument?

_____ YES _____ NO - **GO ON TO 6c**

- b) If yes, how long was it? _____ NUMBER OF FEET

- c) Were you and your group in a vehicle or recreational vehicle pulling a trailer or another vehicle?

_____ YES _____ NO - **GO ON TO 6e**

- d) If yes, how long was the trailer or other vehicle?

_____ NUMBER OF FEET

- e) What other forms of transportation did you and your group use to get to Chiricahua National Monument? Please check (√) **all** that apply.

- _____ CAR/ PICKUP TRUCK/ VAN OTHER THAN RECREATIONAL VEHICLE
- _____ BICYCLE/ MOTORCYCLE
- _____ OTHER (Please specify: _____)

You and Your Opinions

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

_____ NUMBER OF PEOPLE

8. On this visit, were you with an organized tour/ educational group?

_____ YES _____ NO

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

_____ ALONE

_____ FAMILY

_____ FRIENDS

_____ FAMILY AND FRIENDS

_____ OTHER (Please describe: _____)

10. For you and your group, please indicate:

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

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11. a) Do you or anyone in your group have a special interest in Western history (Apache Indians, military, Spanish, ranching, buffalo soldiers, Civilian Conservation Corps, etc.)?

_____ YES _____ NO - **GO ON TO QUESTION 12**

b) If yes, what historical subjects are you most interested in? _____

12. On a future visit to Chiricahua National Monument, what subjects would you be most interested in learning about? Please check (✓) **all** that apply.

_____ THREATENED AND ENDANGERED SPECIES

_____ ANIMAL PROTECTION

_____ AIR QUALITY

_____ WILDERNESS

_____ HISTORIC RESOURCES

_____ ROLE OF FIRE

_____ OTHER (Please specify: _____)

13. Please rate the importance (from 1-5) of each of the following park qualities to your visit to Chiricahua National Monument.

Not Extremely
important important
1 2 3 4 5

_____ WILDLIFE

_____ SCENERY

_____ CLEAN AIR

_____ QUIET


_____ SOLITUDE

_____ WILDERNESS

_____ HISTORIC SETTING

14. a) Prior to receiving this questionnaire, were you aware that most of Chiricahua National Monument is designated wilderness?

YES NO NOT SURE



GO ON TO QUESTION 15

b) If yes, how did you find out about the wilderness designation?

15. a) Please check (√) the information services which you and your group **used** during this visit to Chiricahua National Monument, in the left column.

b) Next, for only those services which you and 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) Use service at Chiricahua? Check (√)	b) If used, how important?					c) If used, what quality?				
	Not important			Extremely important		Very poor			Very good	
	1	2	3	4	5	1	2	3	4	5
<input type="checkbox"/> PARK BROCHURE/MAP										
<input type="checkbox"/> GUIDED TOURS										
<input type="checkbox"/> INFORMATION FROM PARK EMPLOYEES										
<input type="checkbox"/> ENTRANCE STATION										
<input type="checkbox"/> ORIENTATION SLIDE PROGRAM										
<input type="checkbox"/> VISITOR CENTER BOOK SALES										
<input type="checkbox"/> MUSEUM EXHIBITS										
<input type="checkbox"/> ROADSIDE/ TRAILSIDE EXHIBITS										
<input type="checkbox"/> EVENING PROGRAMS										

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16. a) Please check (√) the visitor services and facilities which you and your group **used** during this visit to Chiricahua National Monument, in the left column.
- 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.

a) Use service at Chiricahua? Check (√)	b) If used, how important?					c) If used, what quality?				
	Not important			Extremely important		Very poor			Very good	
	1	2	3	4	5	1	2	3	4	5
_____ PARK DIRECTIONAL SIGNS										
_____ PARKING										
_____ ROADS										
_____ TRAILS										
_____ HIKER SHUTTLE										
_____ RESTROOMS										
_____ PICNIC AREAS										
_____ CAMPGROUND										
_____ HANDICAPPED ACCESS										
_____ GARBAGE COLLECTION										

17. Several ways to reduce visitor congestion at Chiricahua National Monument are being considered. Which do you prefer? Please check (√) only **one**.

- _____ FIRST COME, FIRST SERVED UNTIL THE MONUMENT IS FULL
- _____ RAISE ENTRANCE AND USER FEES
- _____ USE RESERVATION SYSTEM
- _____ USE SHUTTLE BUS SYSTEM
- _____ OTHER (Please specify: _____)

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

VERY GOOD GOOD AVERAGE POOR VERY POOR

19. What advice would you give a manager planning for the future of Chiricahua National Monument? Please be specific.

20. Is there anything else you and your group would like to tell us about your visit to Chiricahua National Monument?

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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OFFICIAL BUSINESS

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