ID: XXXX

Golden Gate National Recreation Area
Visitor Survey

On your recent visit to Golden Gate National Recreation Area, you agreed to participate in a survey from NPS about your trip. **Please have the same individual in your group who completed the onsite survey at the park complete this questionnaire**. In this questionnaire, your personal group is defined as you and anyone with whom you visited Golden Gate National Recreation Area on this trip, such as a spouse, family, friends, etc. This does not include the larger group that you might have traveled with, such as a school, church, scout, or tour group.

A visit is defined as the day in which you were contacted to complete the questionnaire. A trip is defined as the total extent of time away from your personal residence that could include multiple visits to Golden Gate National Recreation Area.

Trip Description

1. Prior to this trip, how did you obtain information about Golden Gate National Recreation Area? (Please mark all that apply.)

- ☐ Did not obtain information prior to this visit
- ☐ Previous visits
- ☐ Friends/relatives/word of mouth
- ☐ Inquiry to park via phone, mail, or email
- ☐ Official Golden Gate website (nps.gov/goga)
- ☐ Other website (please specify): _____
- ☐ Local businesses (hotels, restaurants, etc.)
- ☐ Maps/brochures
- ☐ Newspaper/magazine articles
- ☐ Other units of the National Park System (NPS)
- ☐ School class/program
- ☐ Social media (such as Facebook, Twitter, etc.)
- ☐ Welcome center/visitor bureaus/chamber of commerce
- ☐ Travel guides/tour books (such as AAA, etc.)
- ☐ Television/radio programs/DVDs
- ☐ Online travel agent
- ☐ Cruise ship
- ☐ Live here/grew up here
- ☐ Other (please specify): _____

2. Did you have the information about Golden Gate National Recreation Area you needed on this trip? (Mark one.)

- ☐ Yes
- ☐ No (please specify the information you needed but didn't have on this trip):

_____

_____

3. From the list below, select all forms of transportation you personally used to travel from your home to Golden Gate National Recreation Area on this trip. (Please mark all that apply.)

- ☐ Car, truck, or SUV
- ☐ RV or motorhome
- ☐ Airplane
- ☐ Commercial tour bus
- ☐ Commercial tour van
- ☐ Church, school, or similar group bus/van
- ☐ Taxi/other rideshare options (e.g., Uber, Lyft, etc.)
- ☐ City bus or subway
- ☐ Train or long-distance passenger bus
- ☐ Bicycle
- ☐ Motorcycle
- ☐ Water-based transportation (mark all that apply)
  - ☐ Cruise ship
  - ☐ Ferry
  - ☐ Tour boat
  - ☐ Personal boat
  - ☐ Motorboat
  - ☐ Sailboat
  - ☐ Canoe/kayak
  - ☐ Other (please specify): _____
- ☐ Walk/hike
- ☐ Other (please specify): _____

4. What type of group were you with during your visit to Golden Gate National Recreation Area on the day you were contacted for this survey? (Mark one.)

- ☐ Alone
- ☐ Significant other/spouse
- ☐ Friends
- ☐ Family
- ☐ Family and friends
- ☐ Other (please specify): _____

Expenditures

The National Park Service is interested in the relationship between parks and their local economies. In this section, we ask about goods and services that you and your personal group purchased in Golden Gate National Recreation Area's local area and elsewhere in the US (outside Golden Gate National Recreation Area's local area) during this trip away from home.

Throughout this section, please refer to the local area map on the back of the cover letter when asked about the local area around Golden Gate National Recreation Area. The local area includes all communities within the highlighted region.

5. **How many days did you spend away from home (or your local/seasonal residence) on this trip that included your visit to Golden Gate National Recreation Area?**

   _____ number of days

6. **Of these days spent away from home, how many days were spent in the local area (including days spent in Golden Gate National Recreation Area) shown on the map?**

   _____ number of days

7. **Please estimate how much money the group you shared expenses with (or covered expenses for) spent in the following areas during your trip away from home: (1) Golden Gate National Recreation Area and the local communities surrounding Golden Gate National Recreation Area, and (2) elsewhere in the U.S. outside Golden Gate National Recreation Area's local area.**

Local Area Residents: If you are a permanent or seasonal/second home resident, please only include local area expenditures that were directly related to your trip to Golden Gate National Recreation Area when you received this survey.
Package Vacationers: For this question, don't include any expenditures that were included as part of your package vacation cost (that you reported when interviewed at Golden Gate National Recreation Area).

(If you did not spend anything in a category, please enter "0".)

Expenses	**Amount spent in Golden Gate and nearby communities ($US)** *(shown on map)*	**Amount spent elsewhere in US during your trip to the Golden Gate area ($US)** *(outside local area)*
Hotels, motels, resorts		
Specialty lodging (e.g., B&Bs, hostels, cabins, vacation rentals)		
Camping fees (tent, RV)		
Restaurants and bars		
Groceries and convenience foods		
Gas and oil (e.g., auto, RV, boat, etc.)		
Electric vehicle charging expenses		
Rental car		
Taxis, rideshares, shuttles, parking, and public transportation		
Souvenirs, clothing, supplies, other retail		
National Park entrance fee or annual parks pass		
Alcatraz ferry tickets		
Equipment rental (e.g., bike rentals, etc.)		
Guides and tour fees (e.g., boat tours, etc.)		
Recreation and entertainment expenses (e.g., movies, bowling, miniature golf, etc.)		
Other expenditures (please describe below): _____		
Airline tickets from home (Which airport did you fly into?): _____		

8. How many people (adults and children), including yourself, were covered by the spending estimates you provided above?

_____ number of people (adults and children)

9. If you did not list any expenditures for local area or elsewhere, please indicate why you did not answer. (Mark one per row.)

	I did not spend any money	I do not know or remember	Prefer not to answer	N/A
A. In the Local Area	☐	☐	☐	☐
B. Elsewhere in the US	☐	☐	☐	☐

10. On how many *different days* did you enter Golden Gate National Recreation Area on this trip? (Enter 1 if you only were in the site for one day).

_____ different days entered

Trip Planning and Motivations

11. Did you visit any other National Park Service sites on your trip away from home? (Mark one.)

☐ Yes (please specify which sites, below): **OR** ☐ No

_____

_____

12. On this trip, in which of the following activities did you personally participate while visiting Golden Gate National Recreation Area? (Please mark all that apply.)

☐ (1) Viewing scenery, natural features, etc.
☐ (2) Viewing wildlife
☐ (3) Viewing night skies
☐ (4) Creative arts (photography, drawing, painting, writing)
☐ (5) Visiting a cultural or historic site
☐ (6) Driving for pleasure
☐ (7) Hiking
☐ (8) Mountain biking
☐ (9) Road cycling
☐ (10) Running/jogging
☐ (11) Horseback/mule riding
☐ (12) Fishing
☐ (13) Family gathering (e.g., reunion, wedding)
☐ (14) Picnicking
☐ (15) Water play (swimming, snorkeling, scuba diving, etc.) (please specify): _____
☐ (16) Other (please specify): _____
☐ (17) Other (please specify): _____
☐ (18) Other (please specify): _____

13. Of the activities listed in Question 12, which was your *primary activity* during your visit to Golden Gate National Recreation Area this trip on the day you were contacted for the survey?

_____ activity number

OR

☐ I did not have a primary activity on this trip to Golden Gate National Recreation Area

14. People are motivated to visit a National Park Service site for a variety of reasons. How important to you were each of the following reasons or motivations for visiting Golden Gate National Recreation Area on this trip? (Mark one per row.)

	Not at all Important (1)	Slightly Important (2)	Moderately Important (3)	Very Important (4)	Extremely Important (5)
1) To visit a National Park Service site	☐	☐	☐	☐	☐
2) To experience solitude	☐	☐	☐	☐	☐
3) To hear the sounds of nature/quiet	☐	☐	☐	☐	☐
4) To learn more about nature	☐	☐	☐	☐	☐
5) To learn more about American history and culture	☐	☐	☐	☐	☐
6) To spend time with family/friends	☐	☐	☐	☐	☐
7) To get physical exercise	☐	☐	☐	☐	☐
8) To view wildlife or natural scenery	☐	☐	☐	☐	☐
9) To relax	☐	☐	☐	☐	☐
10) To view dark night sky/stars	☐	☐	☐	☐	☐
11) Other (please specify): _____	☐	☐	☐	☐	☐

15. Of the reasons listed in Question 14, which was the *most important reason* for you to visit Golden Gate National Recreation Area on this trip?

_____ number most important reason from Q14

Park Activities, Programs, and Services

16. On this trip, in which of the following programs and services did you personally participate within Golden Gate National Recreation Area? (Please mark all that apply.)

- ☐ Attending a ranger-led activity, such as a tour or talk
- ☐ Talking informally with a ranger
- ☐ Viewing outdoor exhibits
- ☐ Viewing indoor exhibits
- ☐ Attending a cultural demonstration or performance
- ☐ Reading the park brochure or newspaper
- ☐ Going to a visitor center
- ☐ Watching movies or videos about the park
- ☐ Participating with a child in your group in the Junior Ranger program
- ☐ Participating in the Junior Ranger program
- ☐ Obtaining a National Park passport stamp
- ☐ Listening to an audio tour or podcast
- ☐ Using the National Park Service App
- ☐ Other (please specify): _____

17. On this visit to Golden Gate National Recreation Area, did you learn anything from park staff, programs, and/or exhibits about American history, nature, and/or culture? (Mark one.)

☐ Yes (please specify subjects you learned about, below): **OR** ☐ No

_____

_____

18. If you were to visit Golden Gate National Recreation Area in the future, are there specific subjects you would like to learn about? (Mark one.)

☐ Yes (please specify subjects you would like to learn about, below): **OR** ☐ No

_____

_____

19. Did you use a personal electronic device while in Golden Gate National Recreation Area to do any of the following actions? (Mark one per row.)

	Yes	No	Don't know
Make/receive a cell phone call	☐	☐	☐
Send/receive a text message	☐	☐	☐
Search the internet/email	☐	☐	☐
GPS/Navigation	☐	☐	☐
Share pics/videos/audio via social media	☐	☐	☐
Listen to/use an NPS podcast	☐	☐	☐
Other (please specify): _____	☐	☐	☐

20. How important to you was it during your visit to Golden Gate National Recreation Area to use personal electronic devices to do each of the following, and how would you rate the quality of the service to do each? (For each item, please *Mark one for importance* and *one for quality of service*.)

	IMPORTANCE					QUALITY OF SERVICE					
	Not at all Important (1)	Slightly Important (2)	Moderately Important (3)	Very Important (4)	Extremely Important (5)	No Service (1)	Poor (2)	Average (3)	Good (4)	Very Good (5)	Not Applicable (X)
Make/receive a cell phone call	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Send/receive a text message	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Search the internet/email	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
GPS/Navigation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Share pics/videos/audio via social media	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Listen to/use an NPS podcast	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Other (please specify below): _____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

21. Did anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services during your visit to Golden Gate National Recreation Area? (Mark one.)

a. ☐ Yes ☐ No **[Go to Question 22]**

b. What activities, services, or facilities did the person(s) have difficulty participating in or accessing? Please be specific.

_____

_____

c. Because of the physical condition, which specific difficulties did the person(s) have. (Please mark all that apply.)

- ☐ Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with a hearing aid)
- ☐ Visual (difficulty seeing exhibits, directional signs, or visual aids that are part of programs even with prescribed glasses due to blindness)
- ☐ Mobility (difficulty in accessing facilities, services, or programs even with walking aid and/or wheelchairs)

The following two questions identify the strengths and weaknesses in the site's visitor experience. Golden Gate National Recreation Area managers rely on this information to make decisions that benefit the general public.

22. What did you like the most about your visit to Golden Gate National Recreation Area?

1. _____
2. _____
3. _____

23. What did you like the least about your visit to Golden Gate National Recreation Area?

1. _____
2. _____
3. _____

24. Did your visit to Golden Gate National Recreation Area meet your expectations? (Mark one.)

- ☐ Yes
- ☐ Not entirely
- ☐ Not at all

Please explain your response: _____

_____

_____

_____

25. To what extent do you agree or disagree with each of the following statements? (Mark one per row.)

	Strongly disagree (1)	Somewhat disagree (2)	Neither agree nor disagree (3)	Somewhat agree (4)	Strongly agree (5)	Don't know/Not Sure (X)
Golden Gate National Recreation Area is a safe place to visit	☐	☐	☐	☐	☐	☐
Golden Gate is too crowded	☐	☐	☐	☐	☐	☐
Natural resources in Golden Gate are in pristine condition	☐	☐	☐	☐	☐	☐
Vandalism and crime are not a problem at Golden Gate	☐	☐	☐	☐	☐	☐
Golden Gate is not accessible to a person with physical disabilities	☐	☐	☐	☐	☐	☐
Historical and cultural features in Golden Gate are well maintained/preserved	☐	☐	☐	☐	☐	☐
Development of adjacent areas detracts from visitors' experience at Golden Gate	☐	☐	☐	☐	☐	☐

26. How would you rate the quality of the park facilities, visitor services, and recreational opportunities in Golden Gate National Recreation Area? (Mark one per row.)

	Very Poor (1)	Poor (2)	Average (3)	Good (4)	Very Good (5)	Not Used or Not Available (X)
Park Facilities						
Visitor Center	☐	☐	☐	☐	☐	☐
Exhibits (indoor and outdoor)	☐	☐	☐	☐	☐	☐
Restrooms	☐	☐	☐	☐	☐	☐
Walkways, trails, and roads	☐	☐	☐	☐	☐	☐
Campgrounds and/or picnic areas	☐	☐	☐	☐	☐	☐
Visitor Services						
Assistance from park employees	☐	☐	☐	☐	☐	☐
Park map or brochure	☐	☐	☐	☐	☐	☐
Ranger programs	☐	☐	☐	☐	☐	☐
Commercial services in the park (food, lodging, gifts, rental, etc.)	☐	☐	☐	☐	☐	☐
Other services (please specify below): _____	☐	☐	☐	☐	☐	☐
Recreation Opportunities						
Learning about nature, history, or culture	☐	☐	☐	☐	☐	☐
Outdoor recreation (sightseeing, camping, bicycling, boating, hiking, etc.)	☐	☐	☐	☐	☐	☐

27. Overall, how would you rate the quality of the park facilities, visitor services, and recreational opportunities in Golden Gate National Recreation Area? (Mark one.)

☐ (1) Very poor ☐ (2) Poor ☐ (3) Average ☐ (4) Good ☐ (5) Very good

28. This park was established because of its significance to the nation. In your opinion, what is that national significance of this park?

_____

_____

Background/Demographics

29. If you live in the US, what is your ZIP code? If not US, what is your country of residence?

ZIP Code ___ ___ ___ ___ ___ OR Country _____

30. What is your age? _____ years

31. What is your gender? (Mark one.)

- ☐ Man
- ☐ Woman
- ☐ I prefer to self-describe as: _____
- ☐ Prefer not to respond

32. Are you of Hispanic, Latino, or Spanish origin? (Mark one.)

☐ Yes ☐ No

33. What is your race? (Please mark all that apply.)

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian and other Pacific Islander
- ☐ White
- ☐ Some other race (please describe): _____

34. What is the highest degree or level of school you have completed? (Mark one.)

- ☐ Less than high school/some high school
- ☐ High school graduate
- ☐ Vocational/trade school certificate
- ☐ Some college
- ☐ Associate Degree (AA, AS, etc.)
- ☐ Bachelor's Degree (BA, BS, AB, etc.)
- ☐ Master's Degree (MS, MA, MEd, etc.)
- ☐ Professional Degree (MD, DD, etc.)
- ☐ Doctorate Degree (PhD, EdD, etc.)

35. Which of these categories best represents your annual household income? (Mark one.)

- ☐ Less than $25,000
- ☐ $25,000 to $49,999
- ☐ $50,000 to $74,999
- ☐ $75,000 to $99,999
- ☐ $100,000 to $149,999
- ☐ $150,000 to $199,999
- ☐ $200,000 or more
- ☐ Do not wish to answer

36. Including yourself, how many people contribute to your annual household income?

_____ people

37. Including yourself, how many people (adults and children) are in your household?

_____ people

38. When visiting an area such as Golden Gate National Recreation Area, what language do you prefer to use? (Mark one for speaking and one for reading.)

	ENGLISH	SPANISH	OTHER
Speaking	☐	☐	☐
Reading	☐	☐	☐

If you marked other for speaking and/or reading, please specify which language:

_____

39. Is there anything else you would like to tell us about Golden Gate National Recreation Area's facilities, services, or recreational opportunities?

_____

_____

_____

_____

_____

_____

Thank you for your time and participation in this survey.

Please place this packet into the postage-paid envelope and return it via any US Mail drop box.