



ID: XXXX

Dinosaur National Monument Visitor Survey

On your recent visit to Dinosaur National Monument, 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 Dinosaur National Monument 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 Dinosaur National Monument. Thank you for your participation.

Trip Description

1. Prior to this trip, how did you obtain information about Dinosaur National Monument? Please mark (●) all that apply.

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

2. Did you have the information about Dinosaur National Monument you needed on this trip? Please mark (●) one.

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

Expenditures

3. Using the table on the following page, please estimate how much money the group you shared expenses with (or covered expenses for) spent in Dinosaur National Monument and Dinosaur National Monument's local area during your trip.

Please refer to the local area map on the back of the cover letter – the local area includes all communities within the highlighted region. If you did not spend anything in a category, please enter "0".

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 visit to Dinosaur National Monument 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 Dinosaur National Monument).

Amount spent in Dinosaur National Monument and nearby communities (*shown on map*)

If you did not spend anything in a category, please enter “0”.

Expenses	\$US
Hotels, motels, resorts	
Specialty lodging (B&Bs, hostels, cabins, vacation rentals, etc.)	
Camping fees (tent, RV)	
Restaurants and bars	
Groceries and convenience foods	
Gas and oil (auto, RV, boat, etc.)	
Electric vehicle charging expenses	
Rental car	
Taxis, rideshares, shuttles, parking, and public transportation (including river vehicle shuttles)	
Souvenirs, clothing, supplies, other retail	
National Park entrance fee or annual parks pass	
Equipment rental (e.g., river equipment rentals, UTV rentals, fishing equipment rental)	
Guides and tour fees (e.g., guided rafting trips, guided fishing trips)	
Recreation and entertainment expenses (movies, bowling, etc.)	
Other expenditures (please describe below): _____	

4. **In total, how much did you and the group you shared expenses with (or covered expenses for) spend on this entire trip, from the time you left home until you returned home?**

\$ _____

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

_____ number of people (adults and children)

6. **If you did not list any expenditures in the local area in the table above, please indicate why you did not answer. Please mark (●) one.**

- ☐ I did not spend any money
☐ I do not know or remember
☐ Prefer not to answer
☐ N/A

Trip Planning and Motivations

7. **Did you visit any other National Park Service sites on your trip away from home? Please mark (●) one.**

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

8. 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 Dinosaur National Monument on this trip? Please mark (●) one for each row.

	<u>Not at all</u> <u>Important</u> (1)	<u>Slightly</u> <u>Important</u> (2)	<u>Moderately</u> <u>Important</u> (3)	<u>Very</u> <u>Important</u> (4)	<u>Extremely</u> <u>Important</u> (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 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) Other (please specify): _____	☐	☐	☐	☐	☐

9. Of the reasons listed in Question 8, which was the most important reason for you to visit Dinosaur National Monument on this trip?

_____ reason number

Park Activities, Programs, and Services

10. On this trip, in which of the following programs and services did you personally participate within Dinosaur National Monument? 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
- ☐ 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): _____

11. If you were to visit Dinosaur National Monument in the future, are there specific subjects you would like to learn about? Please mark (●) one.

☐ Yes (please specify subjects you would like to learn about, below):

OR

☐ No

12. Did you use a personal electronic device while in Dinosaur National Monument to do any of the following actions? Please mark (●) one for each 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	☐	☐	☐
Other (please specify): _____	☐	☐	☐

13. How important to you was it during your visit to Dinosaur National Monument 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 row, please mark (●) one for importance and one for quality of service.

	IMPORTANCE					QUALITY OF SERVICE					
	Not at all Important	Slightly Important	Moderately Important	Very Important	Extremely Important	No Service	Poor	Average	Good	Very Good	Not Applicable
	(1)	(2)	(3)	(4)	(5)	(1)	(2)	(3)	(4)	(5)	(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	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Other (please specify below): _____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

14. Did anyone in your personal group have difficulties accessing or participating in park activities or services within Dinosaur National Monument during your trip? Please mark (●) one.

a. ☐ Yes ☐ No [Go to Question 15]

b. Which specific difficulties did the person(s) have? Please mark (●) all that apply.

- ☐ Mobility (difficulty in accessing facilities, services, or programs even with walking aid and/or wheelchairs)
- ☐ 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 or due to blindness)
- ☐ Other (please specify): _____

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

15. What did you like most about your visit to Dinosaur National Monument?

1. _____
2. _____

16. What did you like least about your visit to Dinosaur National Monument?

1. _____

17. To what extent do you agree or disagree with each of the following statements? Please mark (●) one for each row.

[illegible]

18. How would you rate the quality of the park facilities, visitor services, and recreational opportunities in Dinosaur National Monument? Please mark (●) one for each row.

[illegible]

	<u>Very Poor</u>	<u>Poor</u>	<u>Average</u>	<u>Good</u>	<u>Very Good</u>	<u>Not Used or Not Available</u>
	(1)	(2)	(3)	(4)	(5)	(X)
Recreation Opportunities						
Learning about nature, history, or culture	☐	☐	☐	☐	☐	☐
Outdoor recreation (sightseeing, camping, bicycling, boating, hiking, etc.)	☐	☐	☐	☐	☐	☐

19. Overall, how would you rate the quality of the park facilities, visitor services, and recreational opportunities in Dinosaur National Monument? Please mark (●) one.

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

Background/Demographics

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

ZIP Code ____ OR Country _____

21. What is your age? _____ years

22. What is the highest degree or level of school you have completed? Please 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.)

23. Which of these categories best represents your annual household income? Please 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

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

_____ people

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

_____ people

26. What is your race and/or ethnicity? Select all that apply.

☐ American Indian or Alaska Native—*Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.*

☐ Asian—*Provide details below.*

☐ Chinese☐ Asian Indian☐ Filipino

☐ Vietnamese☐ Korean☐ Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ Black or African American— *Provide details below.*

☐ African American☐ Haitian☐ Ethiopian

☐ Jamaican☐ Nigerian☐ Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

☐ Hispanic or Latino— *Provide details below.*

☐ Mexican☐ Salvadoran☐ Dominican

☐ Puerto Rican☐ Cuban☐ Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

☐ Middle Eastern or North African— *Provide details below.*

☐ Lebanese☐ Egyptian☐ Iraqi

☐ Iranian☐ Syrian☐ Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

☐ Native Hawaiian or Pacific Islander— *Provide details below.*

☐ Native Hawaiian☐ Chamorro☐ Fijian

☐ Samoan☐ Tongan☐ Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ White— *Provide details below.*

☐ English☐ Irish☐ Polish

☐ German☐ Italian☐ Scottish

Enter, for example, French, Swedish, Norwegian, etc.

27. Is there anything else you would like to tell us about Dinosaur National Monument’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.