



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

Visitor Services Project

# Fossil Butte National Monument

## Visitor Study





IN REPLY REFER TO:

## United States Department of the Interior

NATIONAL PARK SERVICE  
Fossil Butte National Monument  
PO Box 592  
Kemmerer, WY 83101

August 2010

Dear Visitor:

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

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 after your visit to complete.

When your visit is over, please complete this 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](mailto:littlej@uidaho.edu).

We appreciate your help.

Sincerely,

David McGinnis  
Superintendent

**DIRECTIONS**

At the end of your visit:

- 1) Please have the selected individual complete this questionnaire.
- 2) Answer the questions carefully since each question is different.
- 3) For questions that use circles (○), please mark your answer by filling in the circle with black or blue ink, or a pencil with dark (e.g. #2) lead.

Like this: ● Not like this: (✓) (X) (∕)

- 4) Seal it with the stickers provided.
- 5) Drop it in a U.S. mailbox.

Thank you!

**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 personal 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 Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

## Your Visit To Fossil Butte National Monument

NOTE: In this questionnaire "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.

1. a) Prior to your visit, how did you and your personal group obtain information about Fossil Butte National Monument? Please mark (●) **all** that apply in column (a).
- b) If you were to visit Fossil Butte National Monument in the future, how would you and your personal group prefer to obtain information about the park? Please mark (●) **all** that apply in column (b).

**a) Prior to this visit**

**b) Prior to future visits**

- |  |                       |
|--|-----------------------|
| <input type="radio"/> Did not obtain information prior to visit → <b>Go to part b of this question</b>               |                       |
| <input type="radio"/> Chamber of commerce/visitors bureau/state welcome center                                       | <input type="radio"/> |
| <input type="radio"/> Inquiry to park via phone, mail, or email  | <input type="radio"/> |
| <input type="radio"/> Fossil Butte National Monument website: <a href="http://www.nps.gov/fobu">www.nps.gov/fobu</a> | <input type="radio"/> |
| <input type="radio"/> Other websites   | <input type="radio"/> |
| <input type="radio"/> Friends/relatives/word of mouth  | <input type="radio"/> |
| <input type="radio"/> Maps/brochures   | <input type="radio"/> |
| <input type="radio"/> Newspaper/magazine articles  | <input type="radio"/> |
| <input type="radio"/> Previous visits  | <input type="radio"/> |
| <input type="radio"/> School class/program   | <input type="radio"/> |
| <input type="radio"/> Signs on highway   | <input type="radio"/> |
| <input type="radio"/> Social media (e.g., Facebook, Twitter, etc.)   | <input type="radio"/> |
| <input type="radio"/> Television/radio programs/videos   | <input type="radio"/> |
| <input type="radio"/> Travel guides/tour books (such as AAA, etc.)   | <input type="radio"/> |
| <input type="radio"/> Other (Please specify below)   | <input type="radio"/> |

Prior to this visit \_\_\_\_\_ Prior to future visits \_\_\_\_\_

- c) From the sources marked in column (a), did you and your personal group receive the type of information about the park that you needed?

No                       Yes → **Go to Question 2**

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

\_\_\_\_\_

2. On this trip, what was the **primary** reason that you and your personal group came to the Fossil Butte National Monument **area**? Please mark (●) **one**.

- Resident of the area (within 30 miles of the park) → **Go to Question 3**
- Business
- Traveling through - unplanned visit
- Visit Fossil Butte National Monument
- Visit friends/relatives in the area
- Visit other attractions in the area
- Other (Please specify) \_\_\_\_\_

3. a) In which communities did you and your personal group seek or obtain support services (e.g. information, gas, food, lodging) for this visit to Fossil Butte National Monument? Please mark (●) **all** that apply.

- None → **Go Question 4**
- Kemmerer/ Diamondville, WY
- Rock Springs/ Green River, WY
- Salt Lake City, UT
- Evanston, WY
- Jackson, WY
- Montpelier, ID
- Vernal, UT
- Other (Please specify) \_\_\_\_\_

b) Were you and your personal group able to obtain all the services that you needed in these communities?

- No
- Yes → **Go to Question 4**

c) If NO, what needed services were not available?

Service (List)	Comments (Please be specific)
_____	_____
_____	_____
_____	_____

4. On this trip, where did you and your personal group stay on the **night before** and the **night after** visiting Fossil Butte National Monument? If you stayed at home, please write the name of the town/city and state where you live.

a) BEFORE visit: Town/city \_\_\_\_\_ State \_\_\_\_\_

b) AFTER visit: Town/city \_\_\_\_\_ State \_\_\_\_\_

5. a) On this trip, did you and your personal group stay overnight **away from your permanent residence** in the surrounding area of Fossil Butte National Monument (within 30 miles of the park)?

Yes                       No → **Go to Question 6**

- b) If YES, please list the number of nights you and your personal group stayed in the **surrounding area** of Fossil Butte National Monument.

\_\_\_\_\_ Number of nights in the **surrounding area** outside the park

- c) In which types of lodging did you and your personal group spend the night(s) outside the park in the surrounding area (within 30 miles of the park)? Please mark (●) **all** that apply.

Lodges, motels, vacation rentals, B&B, etc.

RV/trailer camping

Tent camping in developed campground

Backcountry camping

Seasonal residence

Residence of friends or relatives

Other (Please specify) \_\_\_\_\_

6. a) On this visit, which forms of transportation did you and your group use to travel between your overnight accommodations or home, and Fossil Butte National Monument? Please mark (●) **all** that apply.

Private vehicle (car, SUV, pickup, van, etc.)

On foot

RV (rental or private)

School bus

Rental vehicle (other than RV)

Tour bus

Bicycle

Motorcycle

Other (Please specify) \_\_\_\_\_

b) On this visit, how many vehicles did you and your personal group use to arrive at the park? Please write "0" if you did not arrive by vehicle.

\_\_\_\_\_ Number of vehicles

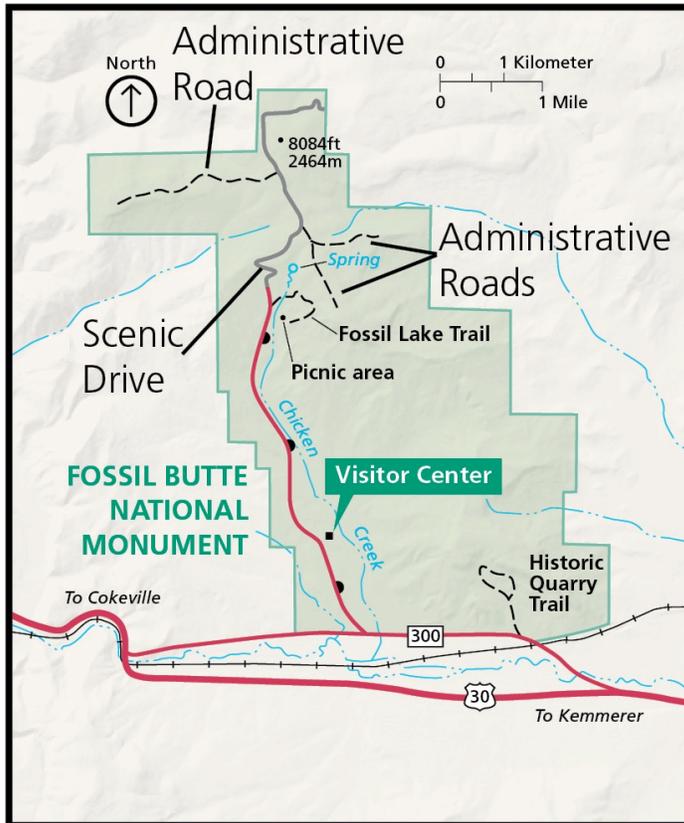
7. a) On this visit, how many hours in **total** did you and your personal group spend visiting Fossil Butte National Monument?

\_\_\_\_\_ Total number of hours (Please list partial hours as 1/4, 1/2, or 3/4.)

b) On this visit, how many times did you and your personal group enter the park?

\_\_\_\_\_ Number entries

8. On this visit to Fossil Butte National Monument, which park sites did you and your personal group visit? Please mark (●) **all** that apply.



- Visitor center
- Hiking trails
- Historic Quarry Trail
- 7.5 mile scenic drive
- Hike/bike
- Administrative roads
- Chicken Creek
- Picnic Area
- Other (Please specify)

9. a) What did you and your personal group like **most** about your visit to Fossil Butte National Monument?

\_\_\_\_\_

\_\_\_\_\_

b) What did you and your personal group like **least** about your visit to Fossil Butte National Monument?

\_\_\_\_\_

\_\_\_\_\_

10. a) On this visit, in which activities did you and your personal group participate within Fossil Butte National Monument? Please mark (●) **all** that apply in column (a).

b) If you were to visit the park in the future, in which activities would you and your personal group prefer to participate? Please mark (●) **all** that apply in column (b).

**a) Activities on this visit** **b) Activities on future visit**

- |                       |   |                       |
|-----------------------|---|-----------------------|
| <input type="radio"/> | Attending ranger-led talks/programs                       | <input type="radio"/> |
| <input type="radio"/> | Creative arts (photography/drawing/painting/writing)      | <input type="radio"/> |
| <input type="radio"/> | Mountain biking   | <input type="radio"/> |
| <input type="radio"/> | Fossil preparation demonstrations                         | <input type="radio"/> |
| <input type="radio"/> | General sightseeing/7.5 mile scenic drive                 | <input type="radio"/> |
| <input type="radio"/> | Interactive electronic ranger computer program            | <input type="radio"/> |
| <input type="radio"/> | Nature study (birdwatching, wildlife viewing, stargazing) | <input type="radio"/> |
| <input type="radio"/> | Roving rangers available to answer questions              | <input type="radio"/> |
| <input type="radio"/> | Participating in Junior Ranger program                    | <input type="radio"/> |
| <input type="radio"/> | Participating in Senior Ranger program                    | <input type="radio"/> |
| <input type="radio"/> | Picnicking  | <input type="radio"/> |
| <input type="radio"/> | Viewing video programs                                    | <input type="radio"/> |
| <input type="radio"/> | Viewing visitor center exhibits                           | <input type="radio"/> |
| <input type="radio"/> | Visiting visitor center                                   | <input type="radio"/> |
| <input type="radio"/> | Walking/hiking  | <input type="radio"/> |
| <input type="radio"/> | Other (Please specify below)                              | <input type="radio"/> |

This visit: \_\_\_\_\_ Future visit: \_\_\_\_\_

c) Which **one** of the above activities was most important to you and your personal group on this visit to Fossil Butte National Monument? Please list **one** response.

\_\_\_\_\_

11. a) On this visit to Fossil Butte National Monument, did anyone in your personal group participate in any of the ranger-led talks/programs?

- No  Yes → **Go to Question 12**



d) Please list any additional topics you and your personal group are interested in learning about Fossil Butte National Monument.

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14. If you were to visit Fossil Butte National Monument in the future, which of the following additional facilities would you like to have available? Please mark (●) **all** that apply.

- None - no additional facilities needed
- Additional hiking trails                       Horseback riding trails
- Mountain biking trails                       Nearby camping facilities
- Expanded visitor center                       Handicapped accessible trail
- Other (Please specify) \_\_\_\_\_

15. a) If you were to visit Fossil Butte National Monument in the future, how would you and your personal group prefer to learn about cultural and natural history/features of the park? Please mark (●) **all** that apply.

- Not interested in learning about the park → **Go to Question 16**
- Junior Ranger program                       Indoor exhibits
- Other children's programs                       Outdoor exhibits
- Senior Ranger program                       Self-guided tours
- Ranger-led interpretive programs                       Nature camp
- Volunteer opportunities (in park)
- Audiovisual programs (DVD, video, or audio)
- Electronic media/devices available to visitors (downloadable digital files, podcasts, interactive computer programs/tours, etc.)
- Printed materials (brochures, books, maps, etc.)
- Park website: [www.nps.gov/fobu](http://www.nps.gov/fobu)
- Other (Please specify) \_\_\_\_\_

b) What length of ranger-led program would you and your personal group like to attend? Please mark (●) **all** that apply.

- Under 1/2 hour                       1/2 - 1 hour                       1 - 2 hours
- Other (Please specify) \_\_\_\_\_

16. a) In your opinion, are campgrounds needed near Fossil Butte National Monument?

No  Yes

b) If campgrounds were provided, would you and your personal group be likely to use them on a future visit?

Yes, likely  No, unlikely  Not sure

17. a) Would you and members of your personal group consider visiting Fossil Butte National Monument again in the future?

Yes  No  Not sure

b) Would you and members of your personal group recommend visiting Fossil Butte National Monument to your friends/relatives?

Yes  No  Not sure

18. It is the National Park Service’s responsibility to protect Fossil Butte National Monument natural, scenic, and cultural resources while at the same time providing for public enjoyment. How important is protection of the following resources/ attributes in the park to you and your personal group? Please mark (●) **one** answer for each resource/attribute.

<b>Resource/attribute</b>	Not important	Somewhat important	Moderately important	Very important	Extremely important
Clean air (visibility)	<input type="radio"/>				
Clean water	<input type="radio"/>				
Dark, starry night sky	<input type="radio"/>				
Educational programs/ opportunities	<input type="radio"/>				
Fossils	<input type="radio"/>				
Native plants	<input type="radio"/>				
Native wildlife	<input type="radio"/>				
Repair/maintenance of facilities/roads/trails	<input type="radio"/>				
Natural quiet/sounds of nature	<input type="radio"/>				
Recreational opportunities	<input type="radio"/>				
Scenic views	<input type="radio"/>				
Opportunities for solitude	<input type="radio"/>				

19. a) Please mark (●) **all** the visitor services and facilities that you and your personal group **used** at Fossil Butte National Monument during this visit.
- b) Next, for **only** those services and facilities that you and your personal group **used**, please rate their importance to your visit from 1-5.
- c) Finally, for **only** those services and facilities that you and your personal group **used**, please rate their quality from 1-5.

<b>a) Visitor services and facilities used</b>	<b>b) If used, how important?</b>	<b>c) If used, what quality?</b>
Mark (●)	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
<input type="radio"/> Bookstore sales items (selection, price, etc.)	_____	_____
<input type="radio"/> Assistance from park staff	_____	_____
<input type="radio"/> Directional signs inside the park	_____	_____
<input type="radio"/> Junior Ranger program	_____	_____
<input type="radio"/> Senior Ranger program	_____	_____
<input type="radio"/> Picnic area	_____	_____
<input type="radio"/> Park brochure/map	_____	_____
<input type="radio"/> Picnic table at Historic Quarry parking area	_____	_____
<input type="radio"/> Ranger-led programs	_____	_____
<input type="radio"/> Restrooms	_____	_____
<input type="radio"/> Roadside exhibits	_____	_____
<input type="radio"/> Trails	_____	_____
<input type="radio"/> Trailside exhibits	_____	_____
<input type="radio"/> Videos/films	_____	_____
<input type="radio"/> Visitor center exhibits	_____	_____
<input type="radio"/> Park website: <a href="http://www.nps.gov/fobu">www.nps.gov/fobu</a> Used before or during visit	_____	_____

d) If you used the park website [www.nps.gov/fobu](http://www.nps.gov/fobu), was there any information that you and your personal group needed that was not available? Please specify below.

Did not use park website → **Go to Question 20**

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20. For you and your personal group, please estimate all expenditures for the items listed below for this visit to Fossil Butte National Monument and the surrounding area (within 30 miles of the park). **Please write "0" if no money was spent in a particular category.**

a) Please list your group's total expenditures in Fossil Butte National Monument.

b) Please list your group's total expenditures in the **surrounding area** outside the park (within 30 miles of the park).

NOTE: Surrounding area residents should only include expenditures that were **just for this trip** to Fossil Butte National Monument.

	<b>EXPENDITURES</b>	
	a) Inside park	b) Outside park
Lodges, hotels, motels, cabins, B&B, etc.	N/A	\$ _____
Camping fees and charges	N/A	\$ _____
Guide fees and charges	N/A	\$ _____
Restaurants and bars	N/A	\$ _____
Groceries and takeout food	N/A	\$ _____
Gas and oil (auto, RV, boat, etc.)	N/A	\$ _____
Other transportation expenses (rental cars, taxis, auto repairs, but NOT airfare)	N/A	\$ _____
Admission, recreation, entertainment fees	N/A	\$ _____
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)

Please write "0" if no children were covered by the expenditures.

21. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services?

- Yes  No → **Go to Question 22**

b) If YES, what services or activities were difficult to access/participate in?

\_\_\_\_\_

c) Because of the physical condition, what specific problems 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 hearing aid)
- Visual (difficulty seeing exhibits, directional signs, or visual aids that are part of programs, even with prescribed glasses or due to blindness)
- Mobility (difficulty accessing facilities, services, or programs, even with walking aid and/or wheelchair)
- Other (Please specify) \_\_\_\_\_

22. On this visit, were you and your personal group part of the following types of organized groups? Please mark (●) **one** for each.

- a) Commercial guided tour group  Yes  No
- b) School/educational group  Yes  No
- c) Other organized group  Yes  No  
(scouts, work, church, etc.)

d) If you were with one of these organized groups, about how many people, including yourself, were in this group?

\_\_\_\_\_ Number of people in organized group

23. a) On this visit, with what kind of personal group (not guided tour/school/other organized group) were you? Please mark (●) **one**.

- Alone  Friends
- Family  Family and friends
- Other (Please specify) \_\_\_\_\_

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

\_\_\_\_\_ Number of people in personal group

24. For you and your personal group on this visit, please provide the following. If you do not know the answer, leave blank.

	Number of visits to Fossil Butte National Monument (including this visit)			
	a) Current age	b) U.S. ZIP code or name of country other than U.S.	c) In past 5 years	d) Lifetime to date
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

25. If you were a manager planning for the future of Fossil Butte National Monument what would you and your personal group propose? Please be specific.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

26. Is there anything else you and your personal group would like to tell us about your visit to Fossil Butte National Monument?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

27. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to you and your personal group at Fossil Butte National Monument during this visit? Please mark (●) **one**.

Very poor	Poor	Average	Good	Very good
<input type="radio"/>				

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  
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Moscow, Idaho 83844-1139**

