

**Part 5. Background Information**

- 1. Are you a U.S. resident?  
 Yes    What is the zip code of your permanent residence? \_\_\_\_\_  
 No    What country are you from? \_\_\_\_\_
- 2. About how far from your home did you travel to get here? \_\_\_\_\_ Miles one way
- 3. What is your age? \_\_\_\_\_ Years
- 4. Gender?     Female     Male
- 5. Your marital status? \_\_\_\_\_ single \_\_\_\_\_ married \_\_\_\_\_ divorced \_\_\_\_\_ widow
- 6. What is your occupation? \_\_\_\_\_
- 7. What best describes your highest formal education? (check one)  
 Grade School                       Some College  
 Some High School                       College Graduate  
 Graduated from High School                       Graduate Student  
 Vocational/Technical School
- 8. Which of the following best describes you? (check one)  
 Black/African American                       American Indian/Alaska Native  
 Asian                       Spanish, Hispanic or Latino  
 White                       Other
- 9. Is there some special accommodation or assistance we could offer that would be helpful to you or anyone in your group to improve your recreation experience?  
 No     Yes    What would that be? \_\_\_\_\_

**Additional comments: Is there anything else that you would like to tell us?**

Office use only:
Survey #: _____
Date: _____
Dispersed or developed ( <i>circle one</i> )
Location: _____

# Grand Mesa, Uncompahgre and Gunnison National Forests & Public Lands Partnership

## 2007 Visitor Use Monitor for the Uncompahgre Plateau

We appreciate your willingness to take part in this study concerning your recreating and camping experience. The purpose of this survey is to collect information from campers about their overall recreating experiences while camping along the Uncompahgre Plateau in the Uncompahgre National Forest, Ouray Ranger District. The Public Lands Partnership is working with the US Forest Service to collect information from you. The information you provide will help the USFS better understand and meet your recreational need, despite declining USFS budgets. It will also guide community volunteers working to help maintain these campgrounds.

Of course, participation in this study is completely voluntary. The information you provide will be kept confidential and results will not be presented in any way that an individual's identity could be recognized.

Please take your time in answering the questions. The questionnaire should take about 20 minutes.

We would be happy to answer any questions you might have regarding the study. Please feel free to contact us by phone or email (details provided below). Thank you very much for your cooperation and travel home safely.

Sincerely,

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\*\*\*\*\*THANK YOU SO MUCH FOR YOUR HELP\*\*\*\*\*

**Part 1. Camping Participation**

1. Where do you prefer to camp on the Plateau within the Uncompahgre National Forest?
  - \_\_\_\_\_ Developed campground (designated site with grill, table & toilet):  
Location \_\_\_\_\_ Why \_\_\_\_\_
  - \_\_\_\_\_ Dispersed camping (on your own guidelines with no amenities):  
Location \_\_\_\_\_ Why \_\_\_\_\_
2. Not including this visit, about how many times have you camped in the Uncompahgre National Forest in the past 12 months? \_\_\_\_\_ Total
  - a. How many times have you camped here in the past five years? \_\_\_\_\_ Total
  - b. When was your first visit? \_\_\_\_\_ Year
3. Was this trip to the Uncompahgre Plateau a (an) \_\_\_\_\_?
  - \_\_\_\_\_ Day trip If day trip, about how many hours will you be here? \_\_\_\_\_ Hours
  - \_\_\_\_\_ Overnight visit If overnight, how many days will you spend on this trip? \_\_\_\_\_ Days
  - What is your primary reason for camping here? \_\_\_\_\_
4. What time of the year do you usually visit the Uncompahgre Plateau?
  - \_\_\_\_\_ Summer \_\_\_\_\_ Spring
  - \_\_\_\_\_ Winter \_\_\_\_\_ Fall
  - \_\_\_\_\_ All year around \_\_\_\_\_ Does not apply
5. Which best describes the composition of your group (people at your campsite)? **(check one)**
  - \_\_\_\_\_ Individual
  - \_\_\_\_\_ Retired couple
  - \_\_\_\_\_ Single parent with children \_\_\_\_\_ Number of people (including yourself)
  - \_\_\_\_\_ Family with Children \_\_\_\_\_ Number of people (including yourself)
  - \_\_\_\_\_ With a group. Which one? \_\_\_\_\_ Number of people (including yourself)
  - Other (Please specify) \_\_\_\_\_ \_\_\_\_\_ Number of people (including yourself)
6. How many people including you traveled here in the same vehicle? \_\_\_\_\_ Total
  - a. How many of those people are less than 16 years old? \_\_\_\_\_ Total

**Part 4. Management Actions**

Management Action	Not at all Acceptable	Some what Acceptable	Moderately Acceptable	Totally Acceptable
Develop a reward system for reporting violators	1	2	3	4
Close developed campgrounds for budgetary reasons	1	2	3	4
Close developed campgrounds due to lack of use	1	2	3	4
Close "non-drinking" water sources in area due to lack of use	1	2	3	4
Create safe drinking water sources in the developed campgrounds	1	2	3	4
Charge fees at developed campgrounds	1	2	3	4
Update older campground facilities (i.e. larger campsites, newer restrooms, handicapped accessibility)	1	2	3	4
Create more developed campgrounds on the Uncompahgre Plateau	1	2	3	4
Install more restroom facilities on the Uncompahgre Plateau	1	2	3	4
Limit or regulate dispersed camping on the Uncompahgre Plateau	1	2	3	4
Enforce travel restrictions on the Uncompahgre Plateau	1	2	3	4

5. Please rate your satisfaction with the following attributes of this recreation site or area of the forest. There are two columns of numbers below associated with each statement. Please indicate how important each statement is in the first column and your satisfaction with each statement in the second column. If an item is N/A leave it blank.

	Importance rating					Performance rating				
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
a. Scenery	1	2	3	4	5	1	2	3	4	5
b. Available parking	1	2	3	4	5	1	2	3	4	5
c. Parking lot condition	1	2	3	4	5	1	2	3	4	5
d. Cleanliness of restrooms	1	2	3	4	5	1	2	3	4	5
e. Condition of the natural environment	1	2	3	4	5	1	2	3	4	5
f. Condition of forest roads	1	2	3	4	5	1	2	3	4	5
g. Condition of forest trails	1	2	3	4	5	1	2	3	4	5
h. Availability of information on recreation	1	2	3	4	5	1	2	3	4	5
i. Feeling of safety	1	2	3	4	5	1	2	3	4	5
j. Adequacy of signage	1	2	3	4	5	1	2	3	4	5
k. Helpfulness of employees	1	2	3	4	5	1	2	3	4	5
l. Availability of interpretive/educational displays, signs, and exhibits	1	2	3	4	5	1	2	3	4	5

6. How much of a problem were each of the following statements during your visit? (**Circle one number for each statement.**)

	Not a problem	Slight problem	Moderate problem	Extreme problem	Do not know
The number of visitors in the area	1	2	3	4	0
Soil/vegetation damage along trails or with the area	1	2	3	4	0
Area poorly maintained	1	2	3	4	0
Area too developed	1	2	3	4	0
Too much litter in the area	1	2	3	4	0
Groups encountered were too large	1	2	3	4	0
Too many places congested with people	1	2	3	4	0
Too many rules and regulations	1	2	3	4	0
Regulations not adequately publicized	1	2	3	4	0
Not enough information on trails	1	2	3	4	0
Visitors not following rules and regulations	1	2	3	4	0

7. How many passenger vehicles does your group have on this trip? \_\_\_\_\_ Total

8. Which of the following **best describes** your camping equipment: (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Tent                               | <input type="checkbox"/> Fold down camper                   |
| <input type="checkbox"/> Travel trailer (less than 20 feet) | <input type="checkbox"/> Travel trailer (more than 20 feet) |
| <input type="checkbox"/> Truck camper                       | <input type="checkbox"/> Fifth wheeler                      |
| <input type="checkbox"/> Motor home                         | <input type="checkbox"/> Camper van                         |
| <input type="checkbox"/> Homemade rig                       | <input type="checkbox"/> Other (describe _____)             |

9. Do you **intend to return** to this area?

- Yes If yes, **why?** \_\_\_\_\_
- No If no, **why?** \_\_\_\_\_
- When? \_\_\_\_\_

10. In which of the following activities have you participated or will participate during this forest visit? Check all those that apply.

Check, if yes	Activity	Check your primary activities
<input type="checkbox"/>	Camping in developed sites (family or group sites)	_____
<input type="checkbox"/>	Dispersed camping (motorized)	_____
<input type="checkbox"/>	Backpacking, camping in unroaded areas	_____
<input type="checkbox"/>	Picnicking and family day gatherings in developed sites	_____
<input type="checkbox"/>	Viewing wildlife	_____
<input type="checkbox"/>	Viewing natural features such as scenery, flowers, etc.	_____
<input type="checkbox"/>	Visiting historic and prehistoric sites/areas	_____
<input type="checkbox"/>	Nature study	_____
<input type="checkbox"/>	General: relaxing, hanging out, escaping heat, noise, etc.	_____
<input type="checkbox"/>	Fishing-all types	_____
<input type="checkbox"/>	Hunting- specify type of hunting:	_____
<input type="checkbox"/>	Off-highway vehicle travel (4-wheelers, dirt bikes, etc.)	_____
<input type="checkbox"/>	Driving for pleasure on roads	_____
<input type="checkbox"/>	Hiking	_____
<input type="checkbox"/>	Walking	_____
<input type="checkbox"/>	Horseback riding	_____
<input type="checkbox"/>	Mountain biking	_____
<input type="checkbox"/>	Gathering mushrooms, berries, firewood, or other natural products	_____
<input type="checkbox"/>	Other, specify _____	_____

10a. From the list above, what was your primary activity on this trip? Why?

11. Are you familiar with **Columbine**  or **Iron Springs**  campgrounds? If yes, **check** one or both.

a. If yes, have you previously camped at one of the sites? Specify which one \_\_\_\_\_

b. Will you return to either Columbine or Iron Springs?

- Yes If yes, **which one and why** \_\_\_\_\_
- No If no, **why not** \_\_\_\_\_

12. If you have previously camped at the **Columbine** or **Iron Springs** campgrounds, please rate the facilities (circle only one number for each).

	Poor	Fair	Average	Good	Excellent
Restroom	1	2	3	4	5
Individual campsite	1	2	3	4	5
Parking	1	2	3	4	5
Noise	1	2	3	4	5
Overall upkeep and cleanliness	1	2	3	4	5

13. Would you be willing to pay a fee to camp at either the **Columbine** or **Iron Springs** campgrounds to help offset the maintenance costs? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Part 2. Sense of Place**

1. Please indicate how you feel about your camping location by responding to each of the statements below.

(Circle one number for each statement)

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a. This is the best place for the recreation activities that I enjoy	1	2	3	4	5
b. Compared to this place, there are few satisfactory alternatives	1	2	3	4	5
c. I have a lot of fond memories of past experiences with family and friends here	1	2	3	4	5
d. I have a strong emotional bond to this place	1	2	3	4	5
e. I feel that this place is a part of me	1	2	3	4	5
f. I feel a strong sense of belonging to this place	1	2	3	4	5
g. I really enjoy this place	1	2	3	4	5
h. Visiting this place says a lot about who I am	1	2	3	4	5
i. I associate special people in my life with this place	1	2	3	4	5
j. Visiting this place allows me to spend time with my family and friends	1	2	3	4	5
k. Where I (we) camp is less important than just being able to recreate on the Uncompahgre Plateau	1	2	3	4	5

2. Do you have a special area which is most meaningful to you on the Uncompahgre Plateau?

\_\_\_\_\_ No  
 \_\_\_\_\_ Yes Specify location \_\_\_\_\_  
 Why is this location most meaningful to you? \_\_\_\_\_

**Part 3. Satisfaction**

1. How well does each of the following statements describe you and your families' feelings about this camping experience? Please circle the most appropriate number for each question.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a. I thoroughly enjoyed the camping trip	1	2	3	4	5
b. I cannot imagine a better camping trip	1	2	3	4	5
c. The camping trip was well worth the money I spent to take it	1	2	3	4	5
d. I do not wish to take any more camping trips like this one	1	2	3	4	5
e. I was disappointed with some aspects of this camping trip	1	2	3	4	5
f. The camping trip was not as enjoyable as expected	1	2	3	4	5

2. Please rate on a scale of 1 (hardly anyone else there) to 10 (very overcrowded) the extent you felt crowded by the number of other visitors using this area for recreation today? Circle one number below

1	2	3	4	5	6	7	8	9	10
Hardly anyone there					Over Crowded				

3. Please rate the level of facility development where you camped. (Circle one number for each item).

Items	No opinion	Much too low	Too low	About right	Too high	Much too high
Overall level of development	0	1	2	3	4	5
Number of picnic areas	0	1	2	3	4	5
Number of trail access areas	0	1	2	3	4	5
Number of parking spaces	0	1	2	3	4	5
Number of toilets	0	1	2	3	4	5
Number of facilities for disabled	0	1	2	3	4	5
Access for disabled	0	1	2	3	4	5

4. What facilities would have improved your recreation experience?