Location (please circle one) CHARTER TOUR OMB Approval: XXXX-XXXX

Date:
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## APPENDIX C: GLACIER BAY VISITOR SURVEY CONTACT SHEET CHARTER AND TOUR BOAT PASSENGERS<sup>1</sup>

Expiration date: X/XX/XXXX

1.	. How many people are in your personal traveling party?		
	Number of people		
2.	Please check the makeup of your personal traveling party:		
	☐ Individual ☐ Family ☐ Friends ☐ Family and friends ☐ Other  (please specify)		
3.	What year were you born? 19		
4.	What are the ages of the other people in your personal traveling party:		
<b>5</b> .	During this trip, have you already visited Glacier Bay National Park and Preserve?		
	<ul><li>☐ Yes</li><li>☐ No</li><li>☐ Don't know</li></ul>		
6.	<b>Are you:</b> □ FEMALE □ MALE		
7.	What is your home Zip or Postal Code? (If you live outside of the United States, please write the name of you country.)		

We would like to send you a questionnaire that asks about your experiences during this trip in Glacier Bay National Park and Preserve. It is estimated to take on average 25 minutes to complete. To participate in this second part of the survey, please provide your name and address so that we can send you that questionnaire. This information will not be used for any purposes other than this survey.

<sup>&</sup>lt;sup>1</sup> These visitors will have the same information collected from them regardless of whether they are single- or multi-day visitors. Thus, one version of the contact sheet will be used for both charter and tour boat passengers.

## PLEASE WRITE CLEARLY

First Name	Last Name	Last Name		
Street Address				
City	State	Zip or Postal Code		
Country, if not USA				