RECREATION RESPONDENT PROFILES

(Personal Interview or Mail Survey)

OMB 0710-0001

Expires: 30 September 2012

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RECREATION RESPONDENT PROFILES

A. TRIP CHARACTERISTICS

	 Trip Behavio Current trip 				
1. Is this	visit part of a da Day trip	y trip or will you	be away from More than one		or more nights?
2. Which one)	of the following	best describes	the type of trip	you are on?	(Please check only
	Single day Overnight t Weekend ti	rip	Vacatio	on trip	
3. How m	any days has it	been since you	started your tr	ip? Da	ays
4. How impo	rtant was viewir	ng the scenery to	your decision	to take a trip to	o this location?
Not at All Important	Slightly Important	Somewhat Important	Quite Important	Extremely Important	
5. How impo	rtant was being	close to nature i	n your decisio	n to take a trip	to this location?
Not at All Important	Slightly Important	Somewhat Important	Quite Important	Extremely Important	
6. How impo	ortant was learr	ning more about	nature in yo	ur decision to	take a trip to this
Not at All Important	Slightly Important	Somewhat Important	Quite Important	Extremely Important	
7. How impor	tant was viewin	g historic sites ir	your decision	n to take a trip t	to this location?
Not at All Important	Slightly Important	Somewhat Important	Quite Important	Extremely Important	

8.	How important was	doing some	hiking in your	decision to take	e a trip to this location?
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Not at All	Slightly	Somewhat	Quite	Extremely
Important	Important	Important	Important	Important

9. How important was doing some fishing in your decision to take a trip to this location?

Not at All	Slightly	Somewhat	Quite	Extremely
Important	Important	Important	Important	Important

10. How important was doing some camping in your decision to take a trip to this location?

Not at All	Slightly	Somewhat	Quite	Extremely
Important	Important	Important	Important	Important

11.	Which of the following statements best describes your reason for choosing [site name] as a destination?
	I planned to visit several recreation areas on this trip, this is the main one I planned to visit several recreation area on this trip, but this is not the main one This destination is one of several recreation areas that I wanted to visit on this trip more or less equally.
	I planned to visit family and/or friends, then while in the general area decided to visit
here here	$_{ extsf{L}}$ I planned to visit the general area for business, then while in the area $$ decided $$ to visit
TICIC	b. General trip behavior
12.	Do your [activity] trips usually occur during? (Check only one) Weekends or Holidays only Weekdays only Both
	2. Trip purpose
13.	Is [site name] your only destination on this trip or is it one of several places you are visiting? Only destination One of several
14.	Is [site name] the first destination on this trip? YES NO

15.	Is your visit to [site name] the main d YES NO IF NO,	estination of your trip? where is your main destination?
16.	Was [site name] the final destination (check one)	on your trip or just one stop along the way?
	Final stop	
	Just one st	•
		as just one stop, how many miles out of your way o visit it? Write 0 if you didn't travel any extramiles (one way)
17.	Is your visit part of a:	
	Vacation pleasure trip	
	Business trip	
	Combined business/pleas	
	Other (specify	
	3. Off-site trip characteristics	
18.	Where did you stay overnight before (town/area)	arriving here?
19.	What destinations did you go to hel	fore coming here? (List destinations in the order
	you visited them)	ore conning here: (List destinations in the order
ti iott	you violicu aromy	
	Name	Name
	City	City
	State	State
	County	County
	Main Activity	Main Activity
	(Note: main activity can include non-	(Note: main activity can include non-
	recreational activities., e.g. visiting	recreational activities., e.g. visiting
	family, business)	family, business)
	Time apont at site (not including travel	Time spent at site (not including travel
	Time spent at site (not including travel time)	Time spent at site (not including travel time)
	Days hours	dayshours
		Means of transportation to get to above
	destination.	destination.
(The	e above format can be repeated as man	y times as necessary)

21.	days
22.	How many days of your trip after you leave here will you spend in [geographic area]?
23.	Have you visited other recreation areas on this trip so far? YES NO
	IF YES, which areas and for how long? Areas: A; B; C Length of stay: A;B; C
24.	Will you visit other recreation areas on this trip after you leave here? YES NO

	IF YES, which areas and for how long? Areas: A; B; C Length of stay: A; B; C 4. Trip planning
25.	In planning this trip did you attempt to avoid crowds by selecting a time when you though the fewest number of people would be at [site name]? NO YES IF YES, what time did you select to avoid crowds?
time c	above question can be modified to identify if respondents are selecting a particular of the year, week, or day to avoid crowds. The question as written above, will have we the particular time frame specified before it is put into use.)
26.	 5. Trip satisfaction Overall, how satisfied were you with this [activity] trip? (please check only one) Extremely satisfied Very satisfied Satisfied Neutral Unsatisfied Very satisfied Very satisfied Extremely unsatisfied
	6. Accommodations used

27.	What type of overnight accommodations are you mostly Motel/hotel Motorhome/camper/van Trailer Tent Other (specify	
	7. Transportation	
	a. Form of transportation	
28.	How did you travel to this recreation area? (check one) HikePassenger vehicle Bicycle Motorhome Bus Camper Other (specify:)	3
29.	In a truck (including 4-wheel drive) In a van	_ On motorcycle _ On foot _ On bicycle _ Other (specify)
	b. Distance traveled	
resear reques mileag examp	Questions in this section deal with distance the respondence. In order to obtain accurate answers these quescher constructing the questionnaire must consider the sted. When mileage is asked, it should be specified if this ge. Also, lack of specificity in the site name can create ole, while it may be less than one mile from the respondence, it may be 15 miles to the nearest place he or she can late.	stions, the manager or specificity of information is one-way or round-trip problems as well. For nt's home to the shore of
B. TR	RAVEL PATTERNS	
30. [activit	On average, how far is it from your home to the placty]? miles	aces where you usually

31.	On average, how of (check one)1-23-45-7		8-14 15 or more	-	is each year?
C. DE	EMOGRAPHICS				
	1. Gender				
32.	What is your sex?	femal	e	male	
33.	How many men and	d women are in yo	ır group?		
		men	women		
34. relation	Starting with yours onship to you (e.g. pers.				
	party members□	relationship to	Age	sex	
	you			circle one)	
	Person no. 1	You		M F	
	Person no. 2			M F	
	Person no. 3			M F	
	Person no. 4			M F	
	Person no. 5			M F	
	. Age low old were you on	vour last hirthday?			
JJ. 11		's old			
36. H	ow many of the peop	ole in your group w	ere in each o	of the following ag	e groups?
	<12	12-17 18	-25 2	6-35 36-4	5

(An advantage to use of categories in asking for the ages of a group is that the respondent may not know the actual ages of everyone in his or her party. The use of categories requires that respondents only know the approximate age of each party member.)

>65

46-55

56-65

37.	What is the highest grade you (Please circle one)	nave comp	oleted in sch	ool?	
	3 4 5 6 78 9 10 entary school Jr. High High s				
	4. Place of residence				
38.	Where is your principle home r (state)			(zi	p code)
	5. Group Composition				
39.	How many people are/were in	your group)?		
40.	On average, how many people1 (alone)2-3	are in you	ır group whe	n you [activi	ty]?
41.	Which of the following best desc	ribes your	group?		
	Family	Bı	ısiness asso	ciates	
	Friends	Ar	n Individual A	lone	
	Family and friends	Ot	her		
42.	If it was an organized group, ple			he group be	low:
	6. Employment Status				
43	Are you presently?	_			
	Employed full-time	Unemplo	yed		
	Employed part-time	Retired			
	Student full-time	Disabled			
	Full-time homemaker				
14 .	What is your occupation?				

3. Education

45. (If married) Is your husband or wife currently...

Employed full-time	Unemployed
Employed part-time	Retired
Student full-time	Disabled
Full-time homemaker	

46. Please indicate which group represents your total pre-tax household income for last year? Please circle one box.

Less than \$10,000	\$50,000-\$74,999
\$10,000-\$14,999	\$75,000-\$99,999
\$15,000-\$24,999	\$100,000-\$149,999
\$25,000-\$34,999	\$150,000-\$199,999
\$35,000-\$49,999	\$200,000 or more

7.	ш	\cap	П	2	ч	\cap	ı	\Box
1.	п	v	U	ں	п	v	ᆫ	ᆫ

2. BLACK

47.	In total how many persons live in your household including yourself?
48.	What is your marital status? single married divorced widowed
49.	How many children do you have? What are their ages?
50.	How would you describe your household? (Mark only one) Single person with no children at home Single person with children at home Two persons with no children at home Two persons with children at home Multiple persons with no children at home Multiple persons with children at home
	8. Race/Ethnicity
51.	Which of the following best describes your ethnic background?
	 HISPANIC ORIGIN NON-HISPANIC ORIGIN
52.	Which of the following best describes your race?
	1 WHITE

- 3. AMERICAN INDIAN OR ALASKAN NATIVE
- 4. ASIAN OR PACIFIC ISLANDER