

# LIBRARY

Department of Biodiversity,  
Conservation and Attractions

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10. How long will your stay be at Karijini National Park this trip?

11. Which gorges in the park have you visited?

Hamersley	<input type="checkbox"/>	Wittenoom	<input type="checkbox"/>
Weano	<input type="checkbox"/>	Knox	<input type="checkbox"/>
Hancock	<input type="checkbox"/>	Kalamina	<input type="checkbox"/>
Joffre	<input type="checkbox"/>	Dales	<input type="checkbox"/>
Vampire	<input type="checkbox"/>	Other (please specify)	<input type="text"/>

12. Have you visited, or do you intend to visit, Millstream- Chichester National Park during this trip?

Yes ☐ No ☐

13. Have you visited, or do you intend to visit, Cape Range National Park and Exmouth during this trip?

Yes ☐ No ☐

14. From where were you visiting?

Live Locally (in the Pilbara) ☐

WA country ☐

WA Perth metro region ☐

Interstate ☐

Please state which state:

Overseas ☐

Please state which country:

15. Are you?

Male ☐ Female ☐

16. Are you visiting?

By yourself ☐

With friend(s) and/or family ☐

With a school group ☐

With a club or organisation ☐

As part of a commercial tour ☐

Other (please specify)

17. How did you first find out about this Park?

Word of mouth ☐

Tourist bureau ☐

Tourist magazine/map ☐

Internet ☐

Media ☐

Local knowledge ☐

Don't recall ☐

Other (please specify)

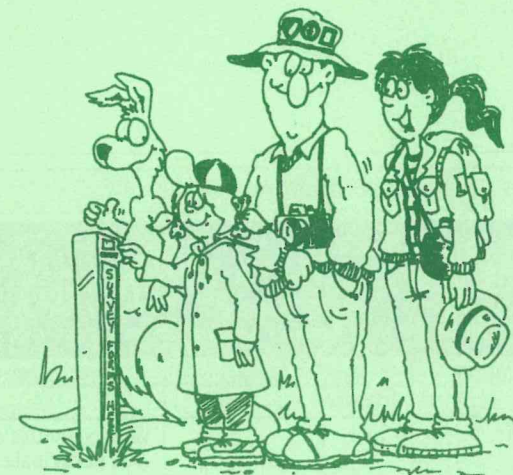
Date:

Thank you very much for taking the time to complete this survey.

Have a safe journey.

sc:6

Tell us about your experience!  
Your feedback is important to us



Hello

You are visiting Karijini National Park managed by the Department of Conservation and Land Management.

We would like to know how you enjoyed your visit. We hope you can spare the time to fill out this feedback form, as you will be helping us to manage the Park.

You will also have the chance to win a PRIZE (see details inside).

This feedback form will only take a few minutes to complete.

Please fill out the form just before you leave, and drop it into the box provided at the Visitor Centre.

Thank you.

PAM04890



DEPARTMENT OF  
**Conservation**  
AND LAND MANAGEMENT  
Conserving the nature of WA



2 Please tell us the extent to which you agree/disagree with the following statements.

Please mark "not applicable" (n/a) if the statement does not apply to your visit. We would appreciate other comments you may have.

STATEMENT	Strongly disagree			Strongly agree			n/a	COMMENTS
I enjoyed the leisure activities I participated in	1	2	3	4	5	6	7	What activities did you participate in?
The condition of the park was excellent	1	2	3	4	5	6	7	
The rangers and other staff were helpful	1	2	3	4	5	6	7	
Road access and conditions were reasonable	1	2	3	4	5	6	7	
The facilities were well managed (quality and cleanliness)	1	2	3	4	5	6	7	
I thought this was an attractive natural area	1	2	3	4	5	6	7	Why?

Extremely displeased						Extremely pleased	
1	2	3	4	5	6	7	

	Strongly disagree			Strongly agree			n/a	COMMENTS
The facilities provided were ideal (type, location and number)	1	2	3	4	5	6	7	Please elaborate:
This area provided a sense of adventure	1	2	3	4	5	6	7	
Sufficient information was provided about the park (such as signs and brochures)	1	2	3	4	5	6	7	
Being here I felt close to nature	1	2	3	4	5	6	7	
Areas such as this provide solitude and isolation	1	2	3	4	5	6	7	
Features of cultural/historic value were well preserved (where applicable)	1	2	3	4	5	6	7	
I saw evidence of environmental degradation (e.g. erosion, littering, vandalism)	1	2	3	4	5	6	7	Please specify:
My visit provided value for money	1	2	3	4	5	6	7	
The information provided was useful	1	2	3	4	5	6	7	

Much worse than expected					Much better than expected	
1	2	3	4	5	6	7

Please tell us a few things about yourself, to help us understand our visitors better.

Please tick one box and answer for yourself only.

Under 15	<input type="checkbox"/>	40 – 59	<input type="checkbox"/>
15 – 24	<input type="checkbox"/>	60 & over	<input type="checkbox"/>
25 – 39	<input type="checkbox"/>		

First Visit	<input type="checkbox"/>	2 - 5 times a year	<input type="checkbox"/>
Less than once a year	<input type="checkbox"/>	More than 5 times a year	<input type="checkbox"/>
Once a year	<input type="checkbox"/>	On a weekly basis	<input type="checkbox"/>

First visit	<input type="checkbox"/>	2 – 5 times a year	<input type="checkbox"/>
Less than once a year	<input type="checkbox"/>	More than 5 times a year	<input type="checkbox"/>
Once a year	<input type="checkbox"/>	On a weekly basis	<input type="checkbox"/>