

## TRAIL EXPERIENCE FORM

Use this form to record information about your visitor experience while on the trail or at the trailhead.  
 \* indicates the field is required. Comments and descriptions are welcome in most boxes.

Observer Name: First & Last	
Observer Email	
Name of Park	
Trailhead (if more than one at this park)	
% Parking Area Used (rough guess)	
Courtesy-related signs & location	
Date of Trip/Observation	
Day of Week	
Start Time: when did you enter the park?	
End Time: when did you leave the park?	
Activity: what were you doing in the park?	
Weather	
Trails Used, Miles, Type of Trail	
Number of Hikers Observed	
Number of Hikers Wearing Both Earbuds	
Number of Horses Observed	
Number of Dogs Observed (total)	
Number of Dogs Off-Leash Observed	
Number of poop bags left on trail	
Number of unbagged dog waste deposits	
Number of Bicycle Riders	
Number of Bikers Wearing Both Earbuds	
Number of Trail Runners	
Number of Trail Runners Wearing Both Earbuds	
Nbr of times required to stop, step off trail, wait for bike rider to pass	
Instance of reckless/dangerous bike riding at high speed	
Nbr of times bike rider slows down to walking speed & communicates	
Nbr of times trail runner slows down to walking speed & communicates	
Trail users unsafely encountering horses	
Comments	
Rate Overall Experience (1=worst, 5=best)	