

Domestic Tourism Survey 2010

A: Particulars of the dwelling

- A1: PSU Number
- A2: Assignment number
- A3: Dwelling unit number
- A4: Physical ID of the dwelling unit/
household

UQ No

D: Survey period

3 2 0 1 0

E: Response period

Visit No	Date (actual)				
	d	d	m	m	y
1					
2					
3					
4					

Next visit (planned)					
d	d	m	m	y	y
1					
2					
3					
4					

Result
Code

A5: Telephone number of enumerated household

A6: Total number of persons in household

A7: Questionnaire number for this household

B: Households at the selected dwelling unit

B1: Household number for this household

B2: Total number of households at selected dwelling unit

C: Field staff

C1: Survey Officer name

Persal number

d d m m y y y

C2: DSC name

Persal number

d d m m y y y

C3: PQM name

Persal number

d d m m y y y

Result codes

	Result codes
01	Completed
02	Non-contact
03	Refused
04	Partly completed
05	No usable information
06	Vacant/unoccupied DU
	07 Listing error
	08 Demolished
	09 Change of status
	10 Other non-response
	11 End at Question B

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h	h	m	m
h	h	m	m
h	h	m	m
h	h	m	m

INTERVIEW START TIME

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FLAP This section covers particulars of each person in the household

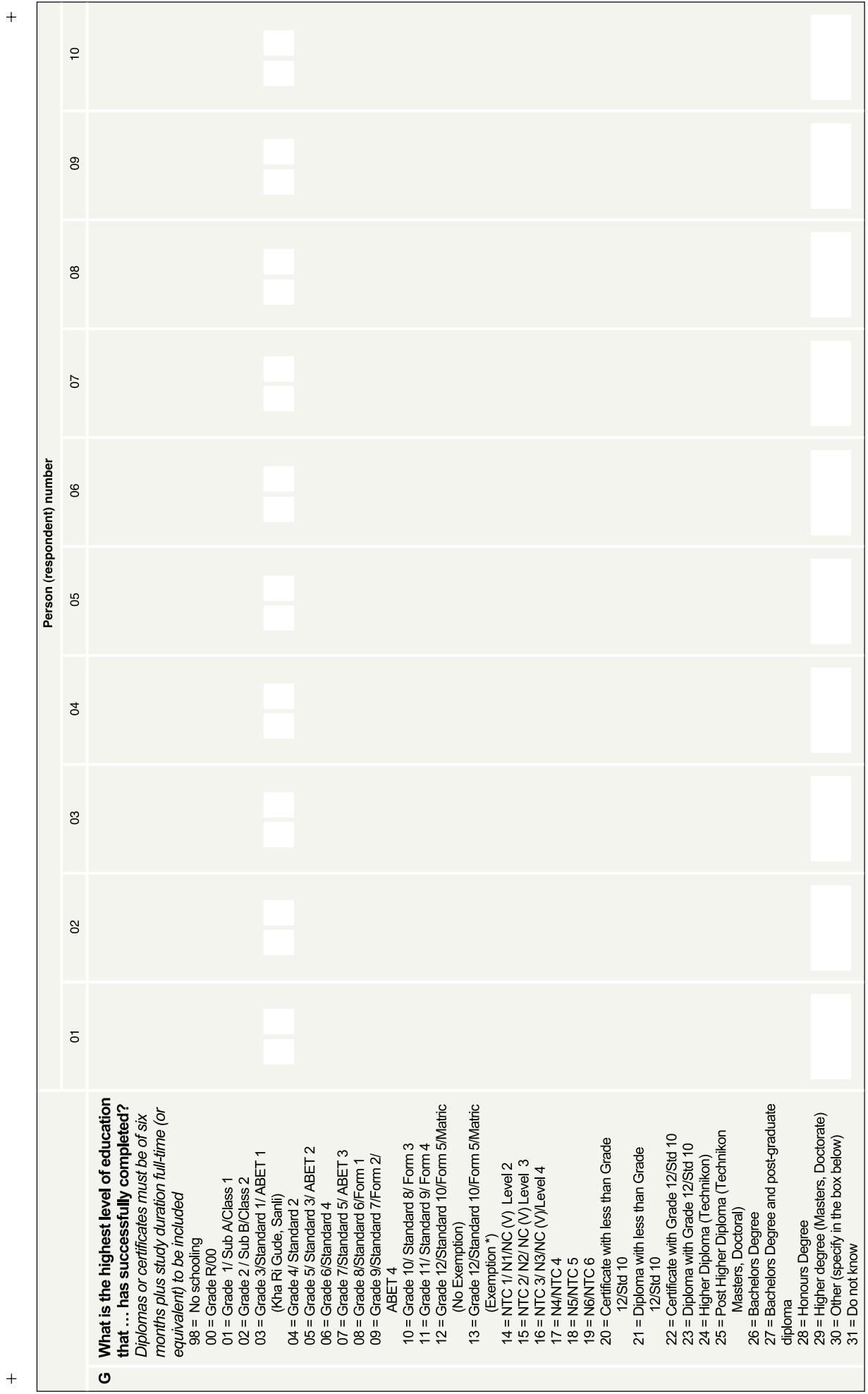
The following information must be obtained for every person who is considered to be a member of the household. **Do not forget babies.**
 If there are more than 10 persons in the household, use a second questionnaire.

				Person (respondent) number									
				01	02	03	04	05	06	07	08	09	10
A First name and surname	First name: Write down first name and surname of each member of the household, starting with the head or acting head. If more than one head or acting head take the oldest												
	Surname:												
B Has stayed here (in this household) for at least four nights on average per week during the last four weeks?	1 = Yes 2 = No → End of interview	1	1	1	1	1	1	1	1	1	1		
		2	2	2	2	2	2	2	2	2	2		
C Is a male or female?	1 = Male 2 = Female	1	1	1	1	1	1	1	1	1	1		
		2	2	2	2	2	2	2	2	2	2		
D What is's date of birth and age in completed years?	Day of Birth: Example of day 05	D	D	D	D	D	D	D	D	D	D		
	Month of birth: Example of month 11	M	M	M	M	M	M	M	M	M	M		
	Year of birth: Example of year 2007	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		
	Age in years Less than one year = 0												

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1

		Person (respondent) number									
		01	02	03	04	05	06	07	08	09	10
E	What population group does belong to?										
	1 = Black African	<input type="checkbox"/>									
	2 = Coloured	<input type="checkbox"/>									
	3 = Indian/Asian	<input type="checkbox"/>									
	4 = White	<input type="checkbox"/>									
	5 = Other (specify in box below)	<input type="checkbox"/>									
F(i)	What is's present marital status?										
	1 = MARRIED	<input type="checkbox"/>									
	2 = LIVING TOGETHER LIKE HUSBAND AND WIFE	<input type="checkbox"/>									
	3 = WIDOW/WIDOWER	<input type="checkbox"/>									
	4 = DIVORCED OR SEPARATED	<input type="checkbox"/>									
	5 = NEVER MARRIED	<input type="checkbox"/>									
F(ii)	Does's spouse/partner live in this household										
	1 = YES	<input type="checkbox"/>									
	2 = NO	<input type="checkbox"/>									
	→ Go to G										
F(iii)	Which person is the spouse/partner of?										
	Give person number										



This section covers economic activities in the last seven days for persons aged 15 years and above

	Person (respondent) number									
	01	02	03	04	05	06	07	08	09	10
H(i)a During the last calendar week (Sunday to Saturday), didwork for a wage, salary, commission or any payment in kind (including paid domestic work), even if it was for only one hour? Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing, paid domestic work. 1 = YES 2 = NO 3 = DO NOT KNOW										
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
H(i)b During the last calendar week (Sunday to Saturday), didrun or do any kind of business, big or small, for him/herself or with one or more partners, even if it was for only one hour? Examples: Commercial farming, selling things, making things for sale, construction, repairing things, guarding cars, brewing beer, collecting wood or water for sale, hairdressing, crèche businesses, taxi or other transport business, having a legal or medical practice, performing in public, having a public phone shop, etc. 1 = YES 2 = NO 3 = DO NOT KNOW										
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
H(i)c During the last calendar week (Sunday to Saturday), didhelp without being paid in any kind of business run by your household, even if it was for only one hour? Examples: Commercial farming, help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc. 1 = YES 2 = NO 3 = DO NOT KNOW										
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 1

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If yes to any part of QH(i) go to H(iii), otherwise go to H(ii)

Person (respondent) number										
	01	02	03	04	05	06	07	08	09	10
H(ii) During the last calendar week (Sunday to Saturday), even though did not do any work for pay, profit or did not help without pay in a household business, did have a job or business that he/she would definitely return to?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 = NO → Go to I <input type="checkbox"/> 3 = DO NOT KNOW → Go to I <i>Those helping unpaid in household businesses should have a "no" answer even if they have a job to definitely return to.</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3								
H(iii) Does work for	1 = National/Provincial/Local Government? → Go to I 2 = A private household? → Go to I 3 = A parastatal (e.g. transnet)? 4 = A private enterprise? 5 = Non-profit organisation (NGO/CBO)? 6 = Don't know	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6
H(iv) What are the goods and services produced by the organisation/business work for? Is it ?	1 = Accommodation 2 = Restaurants and bars 3 = Passenger transport (e.g. road, rail, air) 4 = Travel agents, tour operators 5 = Tour guides 6 = Recreation and entertainment 7 = Cultural services 8 = Trading (e.g. ebony and curios) 9 = Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
I Is there any other person residing in this household, other than those already mentioned, who is not presently here?	<input type="checkbox"/> Yes <input type="checkbox"/> No	→ If "Yes" go back to A								

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SECTION 1: TRIPS BY RESPONDENT

Read out: Now I am going to ask some questions about trips undertaken from March until May. These are trips outside your usual environment (i.e. 40 KMs and above one way but visited less frequently than once a week).

Note that the trip must be completed.

These trips can be for a number of reasons including visiting friends and family, funerals, religious events, sports events, shopping, holidays, business or any **other reason**. Do not include trips to your usual place of work or study, nor to any place for short term or seasonal work contract.

This section covers information on domestic day trips undertaken by the respondent from March 2010 to May 2010. Complete this section for all respondents.

Note that the respondent may take the trip alone or with other household members

BARRIERS TO TAKING TRIPS
Ask if answer to 1.1.a is "no" (the respondent has not taken a day trip inside South Africa).

<p>1.2 Why did you not take any day trips inside South Africa from March to May?</p> <p>Mark only ONE response</p>	<input type="checkbox"/>
	01 = Trips within 40 km radius/family relatives stays within 40km radius
	02 = Financial reasons (Not enough money)
	03 = Recently made a major purchase e.g. bought a car
	04 = Too expensive/would rather spend money on something else
	05 = Not enough time to travel
	06 = Too busy at work/school
	07 = No transport
	08 = No family/friends to visit somewhere else
	09 = Nobody to travel with
	10 = Too much hassle to travel
	11 = Sick
	12 = Disabled
	13 = Too old to travel
	14 = Worried about health issues at the destination
	15 = Worried about safety/security/crime
	16 = Have young children
	17 = No longer wish to travel
	18 = No interest/nothing to see or do that appeals to me
	19 = Taking care of.....sick/elderly relative
	20 = No particular reason
	21 = Other, Specify

Go to Section 2

<p>1.1.a During the months of March to May, have you taken any day trips in South Africa? That is trips in which you returned on the same day and did not stay overnight.</p>	<p>1 = YES 2 = NO</p>	<p><input type="checkbox"/> Go to 1.1b <input type="checkbox"/> Go to 1.2</p>
<p>1.1.b How many day trips did you take inside South Africa from March to May?</p>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Ask if answer to 1.1.a is “Yes”
Read: You’ve already told me that you did take day trips within South Africa from March 2010 to May 2010

1.3	Can you tell me which month(s) these trips took place?	NUMBER OF TRIPS
	Record number of trips per month. If exact months are not known, help respondent to make rough estimates.	
1. March		
2. April		
3. May		
Total (Add 1-3 to confirm Total)		

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Read: I would like you to focus on the most recent day trip inside South Africa that you have undertaken from March to May.

1.4 What was the main destination on this trip? Select the province and district code and write place names <i>If the respondent visited more than one place, state the destination where the most hours were spent</i>	PROVINCIAL CODE	DISTRICT NAME	DISTRICT CODE	PLACE NAME
1 = Western Cape	<input type="checkbox"/> 1	01 = City of Cape Town Metropolitan Municipality 02 = West Coast District Municipality 03 = Cape Winelands Municipality 04 = Overberg District Municipality 05 = Eden District Municipality 06 = Central Karoo District Municipality 99 = Don't Know	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 99	
2 = Eastern Cape	<input type="checkbox"/> 2	01 = Cacadu District Municipality 02 = Amatole District Municipality 03 = Chris Hani District Municipality 04 = Ukhahlamba District Municipality 05 = O R Tambo District Municipality 06 = Alfred Nzo District Municipality 07 = Nelson Mandela 99 = Don't Know	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 99	
3 = Northern Cape	<input type="checkbox"/> 3	01 = Kgalagadi District Municipality 02 = Namakwa District Municipality 03 = Pixley Ka Seme District Municipality 04 = Siyanda District Municipality 05 = Frances Baard District Municipality 99 = Don't Know	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 99	
4 = Free State	<input type="checkbox"/> 4	01 = Xhariep District Municipality 02 = Motsoe District Municipality 03 = Lejwaleputswa District Municipality 04 = Thabo Mofutsanyane District Municipality 05 = Fezile Dabi District Municipality 99 = Don't Know	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 99	

5 = KwaZulu Natal	5	01 = Ugu District Municipality 02 = uMgungundlovu District Municipality 03 = uThukela District Municipality 04 = uMzinyathi District Municipality 05 = Amajuba District Municipality 06 = Zululand District Municipality 07 = uMkhanyakude District Municipality 08 = uThungulu District Municipality 09 = Ilembe District Municipality 10 = Sisonke District Municipality 11 = eThekweni Municipality 99 = Don't know	01 02 03 04 05 06 07 08 09 10 11 99						
6 = North West	6	01 = Bojanala District Municipality 02 = Ngaka Modiri Molema District Municipality 03 = Dr Ruth Segomotsi Mompati District Municipality 04 = Dr Kenneth Kaunda District Municipality 99 = Don't know	01 02 03 04 99						
7 = Gauteng	7	01 = Sedibeng District Municipality 02 = Metsweding District Municipality 03 = West Rand District Municipality 04 = Ekurhuleni Metropolitan Municipality 05 = City of Johannesburg Metropolitan Municipality 06 = City of Tshwane Metropolitan Municipality 99 = Don't know	01 02 03 04 05 06 99						
8 = Mpumalanga	8	01 = Gert Sibande District Municipality 02 = Nkangala District Municipality 03 = Ehlanzeni District Municipality 99 = Don't know	01 02 03 99						
9 = Limpopo	9	01 = Mopani District Municipality 02 = Vhembe District Municipality 03 = Capricorn District Municipality 04 = Waterberg District Municipality 05 = Greater Sekhukhune District Municipality 06 = Don't know	01 02 03 04 05 06 99						

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1.5	What date did this trip take place?	d d m m y y y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	<i>Write the date in the following format (dd/mm/yyyy)</i>	
1.6	Including yourself how many people in total went on this trip? Include those who are not members of your household	<input type="text"/> <input type="text"/>
1.7	Of the people mentioned above, how many were members of your household?	<input type="text"/> <input type="text"/>

1.8	What was the main purpose of this trip?	
	<i>Mark one response only</i>	
	01	<input type="checkbox"/>
	02	<input type="checkbox"/>
	03	<input type="checkbox"/>
	04	<input type="checkbox"/>
	05	<input type="checkbox"/>
	06	<input type="checkbox"/>
	07	<input type="checkbox"/>
	08	<input type="checkbox"/>
	09	<input type="checkbox"/>
	10	<input type="checkbox"/>
	11	<input type="checkbox"/>
	12	<input type="checkbox"/>
	13	<input type="checkbox"/>
	14	<input type="checkbox"/>

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1.9 While on this trip, which of the following activities did you and/or other members of your household undertake, apart from those in the main purpose

Read out each item to the respondent

Mark all options mentioned

		1.9.1 RECREATION / ENTERTAINMENT Mark all options mentioned		1.9.2 BUSINESS / PROFESSIONAL Mark all options mentioned		Respondent		Other household members	
		Y	N	Y	N	Y	N	Y	N
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
01	= Entertainment e.g. cinema, concert, show	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	= Theme parks e.g. aquariums	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03	= Cultural, historical and heritage e.g. cultural village, museums, art gallery, township tour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	= Eating out e.g. restaurants, cafés	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	= Night life e.g. bars, night-clubs, discos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06	= Visited a casino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07	= Shopping e.g. malls, flea/craft markets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08	= Other recreation, entertainment, specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09	= Meeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	= Business conference, convention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	= Trading e.g. bought goods from suppliers or sold goods to customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	= Other business/professional Specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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		1.9.1 RECREATION / ENTERTAINMENT Mark all options mentioned		1.9.2 BUSINESS / PROFESSIONAL Mark all options mentioned		Respondent		Other household members	
		Y	N	Y	N	Y	N	Y	N
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
01	= Entertainment e.g. cinema, concert, show	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	= Theme parks e.g. aquariums	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03	= Cultural, historical and heritage e.g. cultural village, museums, art gallery, township tour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	= Eating out e.g. restaurants, cafés	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	= Night life e.g. bars, night-clubs, discos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06	= Visited a casino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07	= Shopping e.g. malls, flea/craft markets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08	= Other recreation, entertainment, specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09	= Meeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	= Business conference, convention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	= Trading e.g. bought goods from suppliers or sold goods to customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	= Other business/professional Specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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1.9.3 SPORTS Mark all options mentioned	Respondent	Other household members	
13 = Individual sports, e.g. swimming, walking, hiking, cycling	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Y <input type="checkbox"/> N	
14 = Water sports e.g. diving, snorkeling, sailing, surfing	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
15 = Adventure activity e.g. water rafting, mountaineering	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
16 = Attended a sporting event as a spectator	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
17 = Participated in a sporting event e.g. race, competition	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
18 = Other sports Specify	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	

1.9.4 NATURE BASED Mark all options mentioned	Respondent	Other household members	
19 = Visited a rural area	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Y <input type="checkbox"/> N	
20 = Wildlife e.g. game viewing, whale watching, bird watching	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
21 = Hunting	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
22 = Beach e.g. sunbathing and swimming	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
23 = Visited parks/gardens	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
24 = Sightseeing	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
25 = Visited a mountain area	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
26 = Other outdoor/nature based	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
Specify			

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1.9.6 RELIGIOUS ACTIVITY Mark all options mentioned				Respondent	Other household members
Y	N	Y	N	Y	N
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 = Religious conference				<input type="checkbox"/>	<input type="checkbox"/>
31 = Place of worship e.g. church, mosque, synagogue, temple				<input type="checkbox"/>	<input type="checkbox"/>
32 = Other religious Specify				<input type="checkbox"/>	<input type="checkbox"/>

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1.9.5 SOCIAL ACTIVITY Mark all options mentioned				Respondent	Other household members
Y	N	Y	N	Y	N
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27 = Visiting friends/family				<input type="checkbox"/>	<input type="checkbox"/>
28 = Weddings/funerals/ christenings/initiation				<input type="checkbox"/>	<input type="checkbox"/>
29 = Other social activity Specify				<input type="checkbox"/>	<input type="checkbox"/>

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<p>1.9.7 MEDICAL/HEALTH Mark all options mentioned</p> <p>33 = Medical e.g. treatment in clinic/hospital</p> <p>34 = Health/wellness e.g. hydro, spa, beauty centre, health farm</p> <p>35 = Other medical <i>Specify</i></p>	<p>Respondent</p> <p>Y N</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p>	<p>Other household members</p> <p>Y N</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p>							
<p>1.10 What was the main type of transport used to reach the main destination? This is the transport used for the longest part of the journey in terms of distance to reach the destination</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8</p> <p>1 = AIRCRAFT 2 = BUS 3 = CAR 4 = MOTORCYCLE/SCOOTER 5 = BICYCLE 6 = TAXI 7 = TRAIN 8 = OTHER <i>Specify</i></p>									

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<p>1.9.7 MEDICAL/HEALTH Mark all options mentioned</p> <p>33 = Medical e.g. treatment in clinic/hospital</p> <p>34 = Health/wellness e.g. hydro, spa, beauty centre, health farm</p> <p>35 = Other medical <i>Specify</i></p>	<p>Respondent</p> <p>Y N</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p>	<p>Other household members</p> <p>Y N</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p>							
<p>1.10 What was the main type of transport used to reach the main destination? This is the transport used for the longest part of the journey in terms of distance to reach the destination</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8</p> <p>1 = AIRCRAFT 2 = BUS 3 = CAR 4 = MOTORCYCLE/SCOOTER 5 = BICYCLE 6 = TAXI 7 = TRAIN 8 = OTHER <i>Specify</i></p>									

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1.11 Read out: Now the following questions relate to package trips

Check question 1.7 to see how many persons from this household went on this trip

1.11.1 Was this last day trip a package, (where two or more expense items, such as transport and a meal, were included in an all-inclusive price)?			
1 = Yes	<input type="checkbox"/>	2	<input type="checkbox"/>
2 = No	<input type="checkbox"/>	Go to Q1.12	<input type="checkbox"/>
3 = Don't know	<input type="checkbox"/>	Go to Q1.12	<input type="checkbox"/>

1.12 Please indicate exactly which members of the household went on this trip			
1	<input type="checkbox"/>	11	<input type="checkbox"/>
2	<input type="checkbox"/>	12	<input type="checkbox"/>
3	<input type="checkbox"/>	13	<input type="checkbox"/>
4	<input type="checkbox"/>	14	<input type="checkbox"/>
5	<input type="checkbox"/>	15	<input type="checkbox"/>
6	<input type="checkbox"/>	16	<input type="checkbox"/>
7	<input type="checkbox"/>	17	<input type="checkbox"/>
8	<input type="checkbox"/>	18	<input type="checkbox"/>
9	<input type="checkbox"/>	19	<input type="checkbox"/>
10	<input type="checkbox"/>	20	<input type="checkbox"/>

1.11.2 How much did this package trip cost?	Rands
Give the total cost of the package of all persons in the group	

1.11.3 Please indicate which of the following items were included in the package	INCLUDED	YES	NO	DON'T KNOW
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 = Airfare	<input type="checkbox"/>	1	<input type="checkbox"/>	2
2 = Land transport	<input type="checkbox"/>	1	<input type="checkbox"/>	2
3 = Food and beverages	<input type="checkbox"/>	1	<input type="checkbox"/>	2
4 = Recreation and entertainment (e.g payments to a zoo etc)	<input type="checkbox"/>	1	<input type="checkbox"/>	2
5 = Travel insurance	<input type="checkbox"/>	1	<input type="checkbox"/>	2
6 = Shopping	<input type="checkbox"/>	1	<input type="checkbox"/>	2
7 = Other	<input type="checkbox"/>	1	<input type="checkbox"/>	3

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- + Now thinking about any money spent before the trip on items related to the trip
 - Read: I now want you to tell me about the total expenditure before this trip
 - that's all OTHER expenditure for those who have been on a package trip
 - if not a package trip, record all the expenses incurred by you and by the other members of your household also on the trip

1.13 How much money did you and/or other members of your household spend on the following before the trip?

- include all expenses, even those paid for by another party, for example, your host, employer or company
- please include all tips and taxes

Example : R18 000 should be recorded as follows
NO "R" sign should be recorded and NO cents are to be recorded

Person (respondent) number										
	01	02	03	04	05	06	07	08	09	10
01 = Food for the trip										
02 = Gifts										
03 = Travel Insurance										
04 = Other financial services										
05 = Servicing the vehicle										
06 = Checking/servicing alarm system										
07 = Hiring security										
08 = Hiring house sitter										
09 = Clothing										

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Person (respondent) number										
	01	02	03	04	05	06	07	08	09	10
10 = Toiletries										
11 = Luggage										
12 = Medical supplies/inoculations										
13 = Electrical appliances e.g. adaptors										
14 = Other, specify.....										
TOTAL										

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Now thinking about any money spent on the trip on items related to the trip

*Read: I now want you to tell me about the total expenditure on this trip
 that's all OTHER expenditure for those who have been on a package trip
 if not a package trip, record all the expenses incurred by you and by the other members of your household also on the trip*

- include all expenses, even those paid for by another party, for example, your host, employer or company
- please include all tips and taxes

**Example : R18 000 should be recorded as follows
 NO "R" sign should be recorded and NO cents are to be recorded**

1.14 How much money did you and/or other members of your household spend on the following on the trip?	Person (respondent) number									
	01	02	03	04	05	06	07	08	09	10
01 = Airfare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02 = Train	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03 = Land transport (fuel, kombi, bus tickets, toll fees, parking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04 = Car hire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05 = Food and beverages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06 = Recreational/entertainment (sports, game parks and amusement parks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07 = Cultural services (performing arts/ museums)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08 = Medical expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09 = Shopping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Person (respondent) number										
	01	02	03	04	05	06	07	08	09	10
10 = Tour guide										
11 = Other, specify.....										
TOTAL										

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SECTION 2: OVERNIGHT TRIPS BY RESPONDENT

Read out: Now I am going to ask some questions about trips undertaken from March until May. These are trips outside your usual environment (i.e. 40 KMs and above one way but visited less frequently than once a week).

Note that the trip must be completed.

These trips can be for a number of reasons including visiting friends and family, funerals, religious events, sports events, shopping, holidays, business or any **other reason**. Do not include trips to your usual place of work or study, nor to any place for short term or seasonal work contract.

This section covers information on domestic **overnight** trips undertaken by the respondent from **March 2010 to May 2010**. Complete this section for all respondents.

Note that the respondent may take the trip alone or with other household members

BARRIERS TO TAKING TRIPS

Ask if answer to 2.1.a is "no" (the respondent has not taken a overnight trip inside South Africa).

<p>2.2 Why did you not take overnight trips inside South Africa from March to May?</p> <p><i>Mark only ONE response</i></p>	<input type="checkbox"/> <input type="checkbox"/> 01 = Trips within 40 km radius/family relatives says within 02 = Financial reasons (Not enough money) 03 = Recently made a major purchase e.g. bought a car 04 = Too expensive/I would rather spend money on something else 05 = Not enough time to travel 06 = Too busy at work/school 07 = No transport 08 = No family/friends to visit somewhere else 09 = Nobody to travel with 10 = Too much hassle to travel 11 = Sick 12 = Disabled 13 = Too old to travel 14 = Worried about health issues at the destination 15 = Worried about safety/security/crime 16 = Have young children 17 = I no longer wish to travel 18 = No interest/nothing to see or do that appeals to me 19 = Taking care ofsick/elderly relative 20 = Do not like sleeping in other places 21 = No particular reason 22 = Other, Specify
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Go to Section 3

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2.1.a During the months of March to May, have you taken any overnight trips inside South Africa?

These are trips outside your usual environment (i.e. 40 KMs and above one way but visited less frequently than once a week).

Note that the trip must be completed.

These trips can be for a number of reasons including visiting friends and family, funerals, religious events, sports events, shopping, holidays, business or any **other reason**. Do not include trips to your usual place of work or study, nor to any place for short term or seasonal work contract.

This section covers information on domestic **overnight** trips undertaken by the respondent from **March 2010 to May 2010**. Complete this section for all respondents.

Note that the respondent may take the trip alone or with other household members

<p>2.1.a During the months of March to May, have you taken any overnight trips inside South Africa?</p>	<input type="checkbox"/> 1 → Go to 2.1b <input type="checkbox"/> 2 → Go to 2.2
<p>2.1.b How many overnight trips did you take inside South Africa from March to May?</p>	<input type="checkbox"/> <input type="checkbox"/>

Go to 2.3

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Ask if answer to 2.1.a is "Yes"

Read out: You've already told me that you did take overnight trips within South Africa from March 2010 to May 2010

2.3 Can you tell me which month(s) these trips took place?	
	<i>Record number of trips per month. If exact months are not known, help respondent to make rough estimates.</i>
1. March	<input type="text"/>
2. April	<input type="text"/>
3. May	<input type="text"/>
Total (Add 1-3 to confirm Total)	

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Read: I would like you to focus on the most recent domestic overnight trip inside South Africa that you have undertaken from March to May.

2.4 What was the main destination on this trip? Select the province and district code and write place names <i>If the respondent visited more than one place, state the destination where the most hours were spent</i>	PROVINCIAL CODE	DISTRICT NAME	DISTRICT CODE	PLACE NAME	
1 = Western Cape	1	01 = City of Cape Town Metropolitan Municipality 02 = West Coast District Municipality 03 = Cape Winelands Municipality 04 = Overberg District Municipality 05 = Eden District Municipality 06 = Central Karoo District Municipality 99 = Don't know		01 02 03 04 05 06 99	
2 = Eastern Cape	2	01 = Cacadu District Municipality 02 = Amotole District Municipality 03 = Chris Hani District Municipality 04 = Ukhahlamba District Municipality 05 = O R Tambo District Municipality 06 = Alfred Nzo District Municipality 07 = Nelson Mandela 99 = Don't Know		01 02 03 04 05 06 07 99	
3 = Northern Cape	3	01 = Kgalagadi District Municipality 02 = Namakwa District Municipality 03 = Pixley Ka Seme District Municipality 04 = Siyanda District Municipality 05 = Frances Baard District Municipality 99 = Don't Know		01 02 03 04 05 99	
4 = Free State	4	01 = Xhariep District Municipality 02 = Motheo District Municipality 03 = Lejweleputswa District Municipality 04 = Thabo Mofutsanyane District Municipality 05 = Fezile Dabi District Municipality 99 = Don't know		01 02 03 04 05 99	

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5 = Kwa-Zulu Natal	5	01 = Ugu District Municipality 02 = uMgungundlovu District Municipality 03 = uThukela District Municipality 04 = uMzinyathi District Municipality 05 = AmaJuba District Municipality 06 = Zululand District Municipality 07 = uMkhanyakude District Municipality 08 = uThungulu District Municipality 09 = iLembe District Municipality 10 = Siskonke District Municipality 11 = eThekwinini Municipality 99 = Don't know	01 02 03 04 05 06 07 08 09 10 11 99						
6 = North West	6	01 = Bojanala District Municipality 02 = Ngaka Modiri Molema District Municipality 03 = Dr Ruth Segomotsi Mompati District Municipality 04 = Dr Kenneth Kaunda District Municipality 99 = Don't know	01 02 03 04 99						
7 = Gauteng	7	01 = Sedibeng District Municipality 02 = Metsweding District Municipality 03 = West Rand District Municipality 04 = Ekurhuleni Metropolitan Municipality 05 = City of Johannesburg Metropolitan Municipality 06 = City of Tshwane Metropolitan Municipality 99 = Don't know	01 02 03 04 05 06 99						
8 = Mpumalanga	8	01 = Gert Sibande District Municipality 02 = Nkangala District Municipality 03 = Ehlanzeni District Municipality 99 = Don't know	01 02 03 99						
9 = Limpopo	9	01 = Mopani District Municipality 02 = Vhembe District Municipality 03 = Capricorn District Municipality 04 = Waterberg District Municipality 05 = Greater Sekhukhune District Municipality 06 = Don't know	01 02 03 04 05 06 99						

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<p>2.9 What was the main purpose of this trip?</p> <p>Mark ONE response only</p> <p>01 = Leisure/vacation/holiday 02 = Shopping - business 03 = Shopping - personal 04 = Sporting - spectator 05 = Sporting - participant 06 = Visiting friends and/or family 07 = Funeral 08 = Business or professional trip</p> <p>09 = Business conference 10 = Study/educational trip 11 = Medical 12 = Wellness (e.g. spa, health farm) 13 = Religious 14 = Other, specify</p>													
--	--	--	--	--	--	--	--	--	--	--	--	--	--

2.5 What date did this trip take place?	d	d	m	m	y	y	y	y	y	y	y	y	y
2.5.1 Start date (when you left for the trip)													
<i>Write the date in the following format (dd/mm/yyyy)</i>													
2.5.2 End date (when you returned from the trip)	d	d	m	m	y	y	y	y	y	y	y	y	y
<i>Write the date in the following format (dd/mm/yyyy)</i>													
2.6 How many nights were spent on this trip?													
2.7 Including yourself, how many people in total went on this trip? Include those who are not members of your household													
2.8 Of the people mentioned above, how many were members of your household?													

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2.10 While on this trip, which of the following activities did you and/or other members of your household undertake, apart from those in the main purpose?
Read out each item to the respondent

2.10.1 RECREATION / ENTERTAINMENT Mark all options mentioned	Respondent	Other household members
01 = Entertainment e.g. cinema, concert, show	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2
02 = Theme parks e.g. aquariums	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
03 = Cultural, historical and heritage e.g. cultural village, museums, art gallery, township tour	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
04 = Eating out e.g. restaurants, cafés	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
05 = Night life e.g. bars, night-clubs, discos	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
06 = Visited a casino	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
07 = Shopping e.g. malls, flea/ craft markets	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
08 = Other recreation, entertainment, specify	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2

2.10.2 BUSINESS / PROFESSIONAL Mark all options mentioned	Respondent	Other household members
09 = Meeting	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2
10 = Business conference, convention	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
11 = Trading e.g. bought goods from suppliers or sold goods to customers	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2
12 = Other business/professional Specify		

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	2.10.3 SPORTS Mark all options mentioned		Respondent	Other household members
	Y	N	Y	N
13 = Individual sports, e.g. swimming, walking, hiking, cycling	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
14 = Water sports e.g. diving, snorkeling, sailing, surfing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
15 = Adventure activity e.g. water rafting, mountaineering	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
16 = Attended a sporting event as a spectator	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
17 = Participated in a sporting event e.g. race, competition	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
18 = Other sports, specify	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2

	2.10.4 NATURE BASED Mark all options mentioned		Respondent	Other household members
	Y	N	Y	N
19 = Visited a rural area	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
20 = Wildlife e.g. game viewing, whale watching, bird watching	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
21 = Hunting	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
22 = Beach e.g. sunbathing and swimming	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
23 = Visited parks/gardens	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
24 = Sightseeing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
25 = Visited a mountain area	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
26 = Other outdoors/nature based	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Specify				

2.10.6 RELIGIOUS ACTIVITY Mark all options mentioned				Respondent				Other household members				
	Y	N	Other household members	Y	N	Y	N	Y	N	Y	N	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>								
	30 = Religious conference											
	31 = Place of worship e.g. church, mosque, synagogue, temple											
	32 = Other religious, Specify											

2.10.5 SOCIAL ACTIVITY Mark all options mentioned				Respondent				Other household members				
	Y	N	Other household members	Y	N	Y	N	Y	N	Y	N	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>								
	27 = Visiting friends/family											
	28 = Weddings/funerals/ christenings/initiation											
	29 = Other social activity, specify											

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2.10.7	MEDICAL/HEALTH Mark all options mentioned	Respondent	Other household members							
			Y	N	Y	N	Y	N	Y	N
	33 = Medical e.g. treatment in clinic/hospital	<input type="checkbox"/> 1 <input type="checkbox"/> 2								
	34 = Health/wellness e.g. hydro, spa, beauty centre, health farm	<input type="checkbox"/> 1 <input type="checkbox"/> 2								
	35 = Other specify.....	<input type="checkbox"/> 1 <input type="checkbox"/> 2								

2.11	What was the main type of transport used to reach the main destination? This is the transport used for the longest part of the journey in terms of distance to reach the destination	Specify								
			1	2	3	4	5	6	7	8
	1 = AIRCRAFT	<input type="checkbox"/>								
	2 = BUS	<input type="checkbox"/>								
	3 = CAR	<input type="checkbox"/>								
	4 = MOTORCYCLE/SCOOTER	<input type="checkbox"/>								
	5 = BICYCLE	<input type="checkbox"/>								
	6 = TAXI	<input type="checkbox"/>								
	7 = TRAIN	<input type="checkbox"/>								
	8 = OTHER	<input type="checkbox"/>								

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2.12	What was the main type of accommodation used on this last trip?	<p>01 = Hotel 02 = Guest House/Guest Farm 03 = Bed and Breakfast 04 = Lodge 05 = Hostel/Backpackers 06 = Self-catering establishment 07 = Stayed with friends and relatives 08 = Holiday Home/Second Home 09 = Campsite 10 = Caravan Park 11 = Other, specify</p>	<table border="1" style="width: 100%; height: 100px;"> <tr><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td><td>06</td><td>07</td><td>08</td><td>09</td><td>10</td><td>11</td></tr> </table>	01	02	03	04	05	06	07	08	09	10	11
01	02	03	04	05	06	07	08	09	10	11				

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2.13	Was there any special promotion or event that prompted you to go at that particular time? <i>You can mark more than one response</i>	<table border="1" style="width: 100%; height: 100px;"> <tr><td>Y</td><td>N</td><td>2</td></tr> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> <tr><td>8</td><td>1</td><td>2</td></tr> <tr><td>9</td><td>1</td><td>2</td></tr> <tr><td>10</td><td>1</td><td>2</td></tr> <tr><td>11</td><td>1</td><td>2</td></tr> </table>	Y	N	2	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2	8	1	2	9	1	2	10	1	2	11	1	2	<table border="1" style="width: 100%; height: 100px;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> </table>	1	2	3	4	5
Y	N	2																																										
1	1	2																																										
2	1	2																																										
3	1	2																																										
4	1	2																																										
5	1	2																																										
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9	1	2																																										
10	1	2																																										
11	1	2																																										
1	2	3	4	5																																								

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2.15	What method was used to book?
	1 = Personal visit to travel shop 2 = Entirely by telephone 3 = On the internet 4 = Through fax/post 5 = Don't know
2.16	How long before the trip was the booking made?
	1 = Under two weeks 2 = Two to four weeks 3 = One month 4 = Two months 5 = Three months 6 = Four months 7 = Five months 8 = Six months or more 9 = Don't know

2.17.2	How much did this package trip cost?																																												
	Give the total cost of the package of all persons in the group																																												
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5																																												
2.17.3	Please indicate which of the following items were included in the package																																												
	<table border="1"> <thead> <tr> <th>INCLUDED</th> <th>YES</th> <th>NO</th> <th>DON'T KNOW</th> </tr> </thead> <tbody> <tr> <td>1 = Airfare</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>2 = Land transport</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>3 = Accommodation</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>4 = Food and beverages</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>5 = Recreation and entertainment (e.g payments to a zoo etc)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>6 = Travel insurance</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>7 = Shopping</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>8 = Other</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> </tbody> </table>	INCLUDED	YES	NO	DON'T KNOW	1 = Airfare	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	2 = Land transport	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	3 = Accommodation	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	4 = Food and beverages	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	5 = Recreation and entertainment (e.g payments to a zoo etc)	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	6 = Travel insurance	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	7 = Shopping	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	8 = Other	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
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8 = Other	<input type="checkbox"/>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3																																									

Check question 2.8 to see how many persons from this household went on this trip

2.18	Please indicate exactly which members of the household went on this trip
	<input type="checkbox"/> 01 <input type="checkbox"/> 11 <input type="checkbox"/> 02 <input type="checkbox"/> 12 <input type="checkbox"/> 03 <input type="checkbox"/> 13 <input type="checkbox"/> 04 <input type="checkbox"/> 14 <input type="checkbox"/> 05 <input type="checkbox"/> 15 <input type="checkbox"/> 06 <input type="checkbox"/> 16 <input type="checkbox"/> 07 <input type="checkbox"/> 17 <input type="checkbox"/> 08 <input type="checkbox"/> 18 <input type="checkbox"/> 09 <input type="checkbox"/> 19 <input type="checkbox"/> 10 <input type="checkbox"/> 20

2.17 Read out: Now the following questions relate to package trips

2.17.1	Was this last overnight trip a package, (where two or more expense items, such as transport and accommodation, were included in an all-inclusive price)?
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <p style="text-align: right;">→ Go to Q2.18 → Go to Q2.18</p>

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Now thinking about any money spent before the trip on items related to the trip

**Read: I now want you to tell me about the total expenditure before this trip
that's all OTHER expenditure for those who have been on a package trip**

if not a package trip, record all the expenses incurred by you and by the other members of your household also on the trip

• include all expenses, even those paid for by another party, for example, your host, employer or company

• please include all tips and taxes

Example : R18 000 should be recorded as follows
NO "R" sign should be recorded and NO cents

2.19 How much money did you and/or other members of your household spend on the following before the trip?	Person (respondent) number									
	01	02	03	04	05	06	07	08	09	10
01 = Food for the trip										
02 = Gifts										
03 = Travel Insurance										
04 = Other financial services										
05 = Servicing the vehicle										
06 = Checking/servicing alarm system										
07 = Hiring security										
08 = Hiring house sitter										
09 = Clothing										

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	Person (respondent) number									
	01	02	03	04	05	06	07	08	09	10
10 = Toiletries										
11 = Luggage										
12 = Medical supplies/ inoculations										
13 = Electrical appliances e.g. adaptors										
14 = Other, specify.....										
TOTAL										

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Now thinking about any money spent on this trip on items related to the trip
 Read: I now want you to tell me about the total expenditure on this trip

- ***that's all OTHER expenditure for those who have been on a package trip***
- ***if not a package trip, record all the expenses incurred by you and by the other members of your household also on the trip***

• include all expenses, even those paid for by another party, for example, your host, employer or company
 • please include all tips and taxes

Example : R18 000 should be recorded as follows
 NO "R" sign should be recorded and NO cents
 are to be recorded

2.20	How much money did you and/or other members of your household spend on the following on the trip?	Person (respondent) number									
		01	02	03	04	05	06	07	08	09	10
	01 = Airfare										
	02 = Train										
	03 = Land transport (fuel, kombi, bus tickets, toll fees, parking)										
	04 = Car hire										
	05 = Accommodation										
	06 = Food and beverages										
	07 = Recreational/entertainment (sports, game parks and amusement parks)										
	08 = Cultural services (performing arts/ museums)										
	09 = Medical expenses										

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Person (respondent) number											
	01	02	03	04	05	06	07	08	09	10	
10 = Shopping											
11 = Tour guide											
12 = Other, specify.....											
											TOTAL

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SECTION 3: TRIPS BY OTHER MEMBERS OF THE HOUSEHOLD

Read out: Now I am going to ask some questions about trips undertaken from March until May. These are trips outside your usual environment (i.e. 40 KMs and above one way but visited less frequently than once a week).

Note that the trip must be completed.

These trips can be for a number of reasons including visiting friends and family, funerals, religious events, sports events, shopping, holidays, business or any other reason. Do not include trips to the usual place of work or study, nor to any place for short term or seasonal work contract.

This section covers information on domestic day trips undertaken by other members of the household without the respondent. Complete this section if other members of the household have undertaken at least one domestic day trip from March 2010 to May 2010.

	3.2 Can you tell me which month(s) these trips took place? Record number of trips per month. If exact months are not known, help respondent to make rough estimates.	NUMBER OF TRIPS
1. March		
2. April		
3. May		
Total (Add 1-3 to confirm Total)		

3.1a During the months of March to May, has any other member of your household taken any day trips inside South Africa? Again, that is trips in which they returned on the same day and did not stay overnight.	1 = YES 2 = NO	→ Go to 3.1b → Go to SECTION 4
3.1b How many day trips did other members of your household take inside South Africa from March to May?		

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Read: I would like you to focus on the most recent day trip inside South Africa that other members of your household have undertaken from March to May.

3.3 What was the main destination on this trip? Select the province and district code and write place names If the other members of the household visited more than one place, state the destination where the most hours were spent	PROVINCIAL CODE	DISTRICT NAME	DISTRICT CODE	PLACE NAME
1 = Western Cape	1	01 = City of Cape Town Metropolitan Municipality 02 = West Coast District Municipality 03 = Cape Winelands Municipality 04 = Overberg District Municipality 05 = Eden District Municipality 06 = Central Karoo District Municipality 99 = Don't know	01 02 03 04 05 06 99	
2 = Eastern Cape	2	01 = Cacadu District Municipality 02 = Amatole District Municipality 03 = Chris Hani District Municipality 04 = Ukhahlamba District Municipality 05 = O R Tambo District Municipality 06 = Alfred Nzo District Municipality 07 = Nelson Mandela 99 = Don't Know	01 02 03 04 05 06 07 99	
3 = Northern Cape	3	01 = Kgalagadi District Municipality 02 = Namakwa District Municipality 03 = Pixley Ka Seme District Municipality 04 = Siyanda District Municipality 05 = Frances Baard District Municipality 99 = Don't Know	01 02 03 04 05 99	
4 = Free State	4	01 = Xhariep District Municipality 02 = Motheo District Municipality 03 = Lejweleputswa District Municipality 04 = Thabo Motlatsanyane District Municipality 05 = Fezile Dabi District Municipality 99 = Don't know	01 02 03 04 05 99	

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5 = Kwa-Zulu Natal	<input type="checkbox"/> 5	01 = Ugu District Municipality 02 = uMgungundlovu District Municipality 03 = uThukela District Municipality 04 = uMzinyathi District Municipality 05 = Amajuba District Municipality 06 = Zululand District Municipality 07 = uMkhanyakude District Municipality 08 = uThunguji District Municipality 09 = Ilembe District Municipality 10 = Sisonke District Municipality 11 = eThekweni Municipality 99 = Don't know	01	02	03	04	05	06	07	08	09	10	11	99
6 = North West	<input type="checkbox"/> 6	01 = Bojanala District Municipality 02 = Ngaka Modiri Molema District Municipality 03 = Dr Ruth Segomotsi Mompati District Municipality 04 = Dr Kenneth Kaunda District Municipality 99 = Don't know	01	02	03	04	99							
7 = Gauteng	<input type="checkbox"/> 7	01 = Sedibeng District Municipality 02 = Metsweding District Municipality 03 = West Rand District Municipality 04 = Ekurhuleni Metropolitan Municipality 05 = City of Johannesburg Metropolitan Municipality 06 = City of Tshwane Metropolitan Municipality 99 = Don't know	01	02	03	04	05	06	99					
8 = Mpumalanga	<input type="checkbox"/> 8	01 = Gert Sibande District Municipality 02 = Nkangala District Municipality 03 = Ehlanzeni District Municipality 99 = Don't know	01	02	03	99								
9 = Limpopo	<input type="checkbox"/> 9	01 = Mogani District Municipality 02 = Vhembe District Municipality 03 = Capricorn District Municipality 04 = Waterberg District Municipality 05 = Greater Sekhukhune District Municipality 06 = Don't know	01	02	03	04	05	99						

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3.4 What date did this trip take place?	d d m m y y y
<i>Write the date in the following format (dd/mm/yyyy)</i>	<input type="text"/>
3.5 How many people in total went on this trip? Include those who are not members of your household	<input type="text"/> <input type="text"/>
3.6 Of the people mentioned above, how many were members of your household?	<input type="text"/> <input type="text"/>

3.7 What was the main purpose of this trip?	<i>Mark ONE response only</i>
	<input type="checkbox"/> 01
	<input type="checkbox"/> 02
	<input type="checkbox"/> 03
	<input type="checkbox"/> 04
	<input type="checkbox"/> 05
	<input type="checkbox"/> 06
	<input type="checkbox"/> 07
	<input type="checkbox"/> 08
	<input type="checkbox"/> 09
	<input type="checkbox"/> 10
	<input type="checkbox"/> 11
	<input type="checkbox"/> 12
	<input type="checkbox"/> 13
	<input type="checkbox"/> 14
	<i>.....</i>
	

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**3.8 While on this trip, which of the following activities did other members of your household undertake, apart from those in the main purpose?
Read out each item to the respondent**

3.8.1 RECREATION / ENTERTAINMENT Mark all options mentioned	Other household members	3.8.2 BUSINESS / PROFESSIONAL Mark all options mentioned	Other household members
<p>01 = Entertainment e.g. cinema, concert, show</p> <p>02 = Theme parks e.g. aquariums</p> <p>03 = Cultural, historical and heritage e.g. cultural village, museums, art gallery, township tour</p> <p>04 = Eating out e.g. restaurants, cafés</p> <p>05 = Night life e.g. bars, night-clubs, discos</p> <p>06 = Visited a casino</p> <p>07 = Shopping e.g. malls, flea/craft markets</p> <p>08 = Other recreation, entertainment <i>Specify</i></p>	<p>Y N</p> <p> 1 2</p>	<p>09 = Meeting</p> <p>10 = Business conference, convention</p> <p>11 = Trading e.g. bought goods from suppliers or sold goods to customers</p> <p>12 = Other business/professional <i>Specify</i></p>	<p>Y N</p> <p> 1 2</p>

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3.8.3 SPORTS Mark all options mentioned		Other household members	
		Y	N
13 = Individual sports, e.g. swimming, walking, hiking, cycling		<input type="checkbox"/> 1	<input type="checkbox"/> 2
14 = Water sports e.g. diving, snorkeling, sailing, surfing		<input type="checkbox"/> 1	<input type="checkbox"/> 2
15 = Adventure activity e.g. water rafting, mountaineering		<input type="checkbox"/> 1	<input type="checkbox"/> 2
16 = Attended a sporting event as a spectator		<input type="checkbox"/> 1	<input type="checkbox"/> 2
17 = Participated in a sporting event e.g. race, competition		<input type="checkbox"/> 1	<input type="checkbox"/> 2
18 = Other sports <i>Specify</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2

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3.8.4 NATURE BASED Mark all options mentioned		Other household members	
		Y	N
19 = Visited a rural area		<input type="checkbox"/> 1	<input type="checkbox"/> 2
20 = Wildlife e.g. game viewing, whale watching, bird watching		<input type="checkbox"/> 1	<input type="checkbox"/> 2
21 = Hunting		<input type="checkbox"/> 1	<input type="checkbox"/> 2
22 = Beach e.g. sunbathing and swimming		<input type="checkbox"/> 1	<input type="checkbox"/> 2
23 = Visited parks/gardens		<input type="checkbox"/> 1	<input type="checkbox"/> 2
24 = Sightseeing		<input type="checkbox"/> 1	<input type="checkbox"/> 2
25 = Visited a mountain area		<input type="checkbox"/> 1	<input type="checkbox"/> 2
26 = Other outdoor/nature based <i>Specify</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2

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3.8.5 SOCIAL ACTIVITY Mark all options mentioned	<p>Other household members</p> <table style="margin-left: auto; margin-right: auto;"> <tr><td>Y</td><td>N</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table> <p>27 = Visiting friends/family 28 = Weddings/funerals/ christenings/initiation 29 = Other social activity, <i>Specify</i></p>	Y	N	<input type="checkbox"/>	<p>Other household members</p> <table style="margin-left: auto; margin-right: auto;"> <tr><td>Y</td><td>N</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table> <p>30 = Religious conference 31 = Place of worship e.g. church, mosque, synagogue, temple 32 = Other religious <i>Specify</i></p>	Y	N	<input type="checkbox"/>										
Y	N																	
<input type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/>	<input type="checkbox"/>																	
Y	N																	
<input type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/>	<input type="checkbox"/>																	
3.8.6 RELIGIOUS ACTIVITY Mark all options mentioned																		

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3.8.7 MEDICAL/HEALTH Mark all options mentioned		Other household members
	Y N	
	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
33 = Medical e.g. treatment in clinic/hospital		
34 = Health/wellness e.g. hydro, spa, beauty centre, health farm	<input type="checkbox"/> 1 <input type="checkbox"/> 2	
35 = Other medical Specify		

3.9	What was the main type of transport used to reach the main destination? This is the transport used for the longest part of the journey in terms of distance to reach the destination	
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	
	1 = AIRCRAFT 2 = BUS 3 = CAR 4 = MOTORCYCLE/SCOOTER 5 = BICYCLE 6 = TAXI 7 = TRAIN 8 = OTHER Specify	

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3.10 Read out: Now the following questions relate to package trips

Check question 3.6 to see how many persons from this household went on this trip

3.10.1	Was this last day trip a package, (where two or more expense items, such as transport and a meal, were included in an all-inclusive price)?
	<p>1 = Yes → Go to Q3.11</p> <p>2 = No → Go to Q3.11</p> <p>3 = Don't know</p>

3.11	Please indicate exactly which members of the household went on this trip																				
	<table border="1"> <tr><td>01</td><td>11</td></tr> <tr><td>02</td><td>12</td></tr> <tr><td>03</td><td>13</td></tr> <tr><td>04</td><td>14</td></tr> <tr><td>05</td><td>15</td></tr> <tr><td>06</td><td>16</td></tr> <tr><td>07</td><td>17</td></tr> <tr><td>08</td><td>18</td></tr> <tr><td>09</td><td>19</td></tr> <tr><td>10</td><td>20</td></tr> </table>	01	11	02	12	03	13	04	14	05	15	06	16	07	17	08	18	09	19	10	20
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04	14																				
05	15																				
06	16																				
07	17																				
08	18																				
09	19																				
10	20																				

3.10.2	How much did this package trip cost?																					
	<p>Give the total cost of the package of all persons in the group</p> <table border="1"> <tr><td>Rands</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> </table>	Rands	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Rands	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20		

3.10.3	Please indicate which of the following items were included in the package																																								
	<table border="1"> <thead> <tr> <th></th> <th>INCLUDED</th> <th>YES</th> <th>NO</th> <th>DON'T KNOW</th> </tr> </thead> <tbody> <tr><td>1 = Airfare</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>2 = Land transport</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>3 = Food and beverages</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>4 = Recreation and entertainment (e.g payments to a zoo etc)</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>5 = Travel insurance</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>6 = Shopping</td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>7 = Other</td><td></td><td>1</td><td>2</td><td>3</td></tr> </tbody> </table>		INCLUDED	YES	NO	DON'T KNOW	1 = Airfare		1	2	3	2 = Land transport		1	2	3	3 = Food and beverages		1	2	3	4 = Recreation and entertainment (e.g payments to a zoo etc)		1	2	3	5 = Travel insurance		1	2	3	6 = Shopping		1	2	3	7 = Other		1	2	3
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7 = Other		1	2	3																																					

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- include all expenses, even those paid for by another party, for example, the host, employer or company
- please include all tips and taxes

Read: I now want you to tell me about the total expenditure before this trip

- *that's all OTHER expenditure for those who have been on a package trip*
- *If not a package trip, record all the expenses incurred by the other members of your household on the trip*

3.12 How much money did other members of your household spend on the following before the trip?	Person number									
	01	02	03	04	05	06	07	08	09	10
01 = Food for the trip										
02 = Gifts										
03 = Travel Insurance										
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14 = Other, specify.....										
TOTAL										

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- Now thinking about any money spent on this trip on items related to the trip**
- Read: I now want you to tell me about the total expenditure on this trip
that's all OTHER expenditure for those who have been on a package trip
If not a package trip, record all the expenses incurred by the other members of your household also on the trip
- include all expenses, even those paid for by another party, for example, the host, employer or company
 - please include all tips and taxes

Example : R18 000 should be recorded as follows
 NO "R" sign should be recorded and NO cents are to be recorded

	3.13 How much money did other members of your household spend on the following on this trip?	Person number									
		01	02	03	04	05	06	07	08	09	10
	01 = Airfare										
	02 = Train										
	03 = Land transport (fuel, kombi, bus tickets, toll fees, parking)										
	04 = Car hire										
	05 = Accommodation										
	06 = Food and beverages										
	07 = Recreational/entertainment (sports, game parks and amusement parks)										
	08 = Cultural services (performing arts/ museums)										
	09 = Medical expenses										

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	Person number	01	02	03	04	05	06	07	08	09	10
10 = Shopping											
11 = Tour guide											
12 = Other, specify.....											
	TOTAL										

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SECTION 4: OVERNIGHT TRIPS BY OTHER MEMBERS OF THE HOUSEHOLD

This section covers information on domestic overnight trips undertaken by **other members of the household** from March 2010 to May 2010 without the respondent. Complete this section if other members of the household have undertaken at least one domestic overnight trip from March to May.

Read out: You've already told me that members of your household have undertaken overnight trips within South Africa from March to May

4.1.a <i>During the months of March to May, has any other member of your household taken any overnight trips inside South Africa?</i>	
1 = YES 2 = NO	<input type="checkbox"/> 1 <input type="checkbox"/> 2 → Go to 4.1b → Go to SECTION 5
4.1.b <i>How many overnight trips did other members of your household take inside South Africa from March to May?</i>	
Total (Add 1-3 to confirm Total)	

4.2 <i>Can you tell me which month(s) these trips took place?</i>	
<i>Record number of trips per month. If exact months are not known, help respondent to make rough estimates.</i>	
1. March	<input type="checkbox"/>
2. April	<input type="checkbox"/>
3. May	<input type="checkbox"/>
Total (Add 1-3 to confirm Total)	

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Read: I would like you to focus on the most recent overnight trip that members of your household have undertaken from March to May

4.3 What was the main destination on this trip? Select the province and district code and write place names If the other members of the household visited more than one place, state the destination where the most hours were spent	PROVINCIAL CODE	DISTRICT NAME	DISTRICT CODE	PLACE NAME
1 = Western Cape	1	01 = City of Cape Town Metropolitan Municipality 02 = West Coast District Municipality 03 = Cape Winelands Municipality 04 = Overberg District Municipality 05 = Eden District Municipality 06 = Central Karoo District Municipality 99 = Don't Know	01 02 03 04 05 06 99	01 02 03 04 05 06 99
2 = Eastern Cape	2	01 = Cacadu District Municipality 02 = Amatole District Municipality 03 = Chris Hani District Municipality 04 = Ukhahlamba District Municipality 05 = O R Tambo District Municipality 06 = Alfred Nzo District Municipality 07 = Nelson Mandela 99 = Don't Know	01 02 03 04 05 06 07 99	01 02 03 04 05 06 07 99
3 = Northern Cape	3	01 = Kgalagadi District Municipality 02 = Namakwa District Municipality 03 = Pixley Ka Seme District Municipality 04 = Siyanda District Municipality 05 = Frances Baard District Municipality 99 = Don't Know	01 02 03 04 05 99	01 02 03 04 05 99
4 = Free State	4	01 = Xhariep District Municipality 02 = Motheo District Municipality 03 = Lejweleputswa District Municipality 04 = Thabo Motlatsanyane District Municipality 05 = Fezile Dabi District Municipality 99 = Don't know	01 02 03 04 05 99	01 02 03 04 05 99

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5 = Kwa-Zulu Natal	5	01 = Ugu District Municipality 02 = uMgungundlovu District Municipality 03 = uThukela District Municipality 04 = uMzinyathi District Municipality 05 = Amajuba District Municipality 06 = Zululand District Municipality 07 = uMkhanyakude District Municipality 08 = uThungulu District Municipality 09 = Ilembe District Municipality 10 = Sisonke District Municipality 11 = eThekweni Municipality 99 = Don't know	01 02 03 04 05 06 07 08 09 10 11 99						
6 = North West	6	01 = Bojanala District Municipality 02 = Ngaka Modiri Molema District Municipality 03 = Dr Ruth Segomotsi Mompati District Municipality 04 = Dr Kenneth Kaunda District Municipality 99 = Don't know	01 02 03 04 99						
7 = Gauteng	7	01 = Sedibeng District Municipality 02 = Metsweding District Municipality 03 = West Rand District Municipality 04 = Ekurhuleni Metropolitan Municipality 05 = City of Johannesburg Metropolitan Municipality 06 = City of Tshwane Metropolitan Municipality 99 = Don't know	01 02 03 04 05 06 99						
8 = Mpumalanga	8	01 = Gert Sibande District Municipality 02 = Nkangala District Municipality 03 = Ehlanzeni District Municipality 99 = Don't know	01 02 03 99						
9 = Limpopo	9	01 = Mopani District Municipality 02 = Vhembe District Municipality 03 = Capricorn District Municipality 04 = Waterberg District Municipality 05 = Greater Sekhukhune District Municipality 06 = Don't know	01 02 03 04 05 99						

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4.4	What date did this trip take place?	
4.4.1	Start date (when the members of your household left for the trip)	d d m m y y y y <input type="checkbox"/> <input type="checkbox"/>
	<i>Write the date in the following format (dd/mm/yyyy)</i>	
4.4.2	End date (when they returned from the trip)	d d m m y y y y <input type="checkbox"/> <input type="checkbox"/>
	<i>Write the date in the following format (dd/mm/yyyy)</i>	
4.5	How many nights were spent on this trip?	<input type="checkbox"/> <input type="checkbox"/>
4.6	How many people in total went on this trip? Include those who are not members of your household	<input type="checkbox"/> <input type="checkbox"/>
4.7	Of the people mentioned above, how many were members of your household?	<input type="checkbox"/> <input type="checkbox"/>

4.8	What was the main purpose of this trip? Mark ONE response only	
	01 = Leisure/vacation/holiday	<input type="checkbox"/>
	02 = Shopping - business	<input type="checkbox"/>
	03 = Shopping - personal	<input type="checkbox"/>
	04 = Sporting - spectator	<input type="checkbox"/>
	05 = Sporting - participant	<input type="checkbox"/>
	06 = Visiting friends and/or family	<input type="checkbox"/>
	07 = Funeral	<input type="checkbox"/>
	08 = Business or professional trip	<input type="checkbox"/>
	09 = Business conference	<input type="checkbox"/>
	10 = Study/educational trip	<input type="checkbox"/>
	11 = Medical	<input type="checkbox"/>
	12 = Wellness (e.g. spa, health farm)	<input type="checkbox"/>
	13 = Religious	<input type="checkbox"/>
	14 = Other, specify	<input type="checkbox"/>
		<input type="checkbox"/>

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4.9 While on this trip, which of the following activities did other members of your household undertake, apart from those in the main purpose?
Read out each item to the respondent

4.9.1 RECREATION / ENTERTAINMENT Mark all options mentioned		4.9.2 BUSINESS / PROFESSIONAL Mark all options mentioned		Other household members	
01 = Entertainment e.g. cinema, concert, show	<input type="checkbox"/> 1 <input type="checkbox"/> 2	09 = Meeting		<input type="checkbox"/> Y <input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2
02 = Theme parks e.g. aquariums	<input type="checkbox"/> 1 <input type="checkbox"/> 2	10 = Business conference, convention		<input type="checkbox"/> 1 <input type="checkbox"/> 2	
03 = Cultural, historical and heritage e.g. cultural village, museums, art gallery, township tour	<input type="checkbox"/> 1 <input type="checkbox"/> 2	11 = Trading e.g. bought goods from suppliers or sold goods to customers		<input type="checkbox"/> 1 <input type="checkbox"/> 2	
04 = Eating out e.g. restaurants, cafés	<input type="checkbox"/> 1 <input type="checkbox"/> 2	12 = Other business/professional <i>Specify</i>		<input type="checkbox"/> 1 <input type="checkbox"/> 2	
05 = Night life e.g. bars, night-clubs, discos	<input type="checkbox"/> 1 <input type="checkbox"/> 2			<input type="checkbox"/> 1 <input type="checkbox"/> 2	
06 = Visited a casino	<input type="checkbox"/> 1 <input type="checkbox"/> 2			<input type="checkbox"/> 1 <input type="checkbox"/> 2	
07 = Shopping e.g. malls, flea/craft markets	<input type="checkbox"/> 1 <input type="checkbox"/> 2			<input type="checkbox"/> 1 <input type="checkbox"/> 2	
08 = Other recreation, entertainment <i>Specify</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2			<input type="checkbox"/> 1 <input type="checkbox"/> 2	

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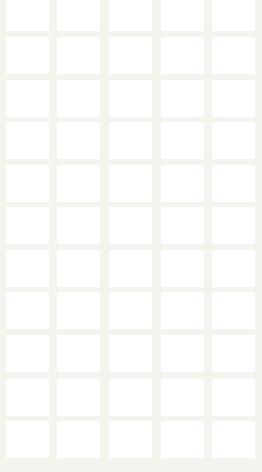
<p>4.9.3 SPORTS Mark all options mentioned</p> <p>13 = Individual sports, e.g. swimming, walking, hiking, cycling</p> <p>14 = Water sports e.g. diving, snorkeling, sailing, surfing</p> <p>15 = Adventure activity e.g. water rafting, mountaineering</p> <p>16 = Attended a sporting event as a spectator</p> <p>17 = Participated in a sporting event e.g. race, competition</p> <p>18 = Other sports Specify</p>	<p>Y N</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2</p>	<p>Other household members</p>
		<p>4.9.4 NATURE BASED Mark all options mentioned</p> <p>19 = Visited a rural area</p> <p>20 = Wildlife e.g. game viewing, whale watching, bird watching</p> <p>21 = Hunting</p> <p>22 = Beach e.g. sunbathing and swimming</p> <p>23 = Visited parks/gardens</p> <p>24 = Sightseeing</p> <p>25 = Visited a mountain area</p> <p>26 = Other outdoor/nature based Specify</p>
		<p>Other household members</p>

4.9.5 SOCIAL ACTIVITY Mark all options mentioned	<p>27 = Visiting friends/family 28 = Weddings/funerals/ christenings/initiation 29 = Other social activity, <i>Specify</i></p> <p>30 = Religious conference 31 = Place of worship e.g. church, mosque, synagogue, temple</p> <p>32 = Other religious <i>Specify</i></p>
<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2	

4.9.6 RELIGIOUS ACTIVITY Mark all options mentioned	<p>30 = Religious conference 31 = Place of worship e.g. church, mosque, synagogue, temple</p> <p>32 = Other religious <i>Specify</i></p>
<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> 1 <input type="checkbox"/> 2	

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4.9.7 MEDICAL/HEALTH Mark all options mentioned		Other household members
		Y N <input type="checkbox"/> 1 <input type="checkbox"/> 2
33 = Medical e.g. treatment in clinic/hospital		<input type="checkbox"/> 1 <input type="checkbox"/> 2
34 = Health/wellness e.g. hydro, spa, beauty centre, health farm		<input type="checkbox"/> 1 <input type="checkbox"/> 2
35 = Other medical		
		Specify

4.10	What was the main type of transport used to reach the main destination? This is the transport used for the longest part of the journey in terms of distance to reach the destination
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 7 <input type="checkbox"/> 8 Specify 

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4.11	What was the main type of accommodation used on this last trip?										
	01 = Hotel 02 = Guest House/Guest Farm 03 = Bed and Breakfast 04 = Lodge 05 = Hostel/Backpackers 06 = Self-catering establishment 07 = Stayed with friends and relatives 08 = Holiday Home/Second Home 09 = Campsite 10 = Caravan Park 11 = Other, specify										

4.12	Was there any special promotion or event that prompted the members of your household to go at that particular time? You can mark more than one response																						
	YES NO <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 1 <input type="checkbox"/> 4 <input type="checkbox"/> 2 <input type="checkbox"/> 5 <input type="checkbox"/> 2 <input type="checkbox"/> 6 <input type="checkbox"/> 1 <input type="checkbox"/> 7 <input type="checkbox"/> 2 <input type="checkbox"/> 8 <input type="checkbox"/> 1 <input type="checkbox"/> 9 <input type="checkbox"/> 2 <input type="checkbox"/> 10 <input type="checkbox"/> 1 <input type="checkbox"/> 11 <input type="checkbox"/> 2																						
	01 = Family event/occasion 02 = Cheap airfares 03 = Accommodation promotion 04 = Participation in sport event 05 = Spectator of a sport event 06 = Music/cultural event 07 = Business/Exhibition/Conference 08 = Wine/food festival 09 = Club meeting/reunion 10 = Religious event 11 = Other specify																						
												4.13	How was the trip booked? Was it through										
												1 = A Tour operator 2 = A Travel agent 3 = Booked independently 4 = No booking necessary 5 = Did not make booking myself, don't know	} → Go to 4.16										

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4.14	What method was used to book?
	1 = Personal visit to travel shop 2 = Entirely by telephone 3 = On the internet 4 = Through fax/post 5 = Don't know
4.15	How long before the trip was the booking made?
	1 = Under two weeks 2 = Two to four weeks 3 = One month 4 = Two months 5 = Three months 6 = Four months 7 = Five months 8 = Six months or more 9 = Don't know

4.16.2	How much did this package trip cost?
	Rands <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	Give the total cost of the package of all persons in the group
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

4.16.3	Please indicate which of the following items were included in the package																																				
	<table border="1"> <thead> <tr> <th>INCLUDED</th> <th>YES</th> <th>NO</th> <th>DON'T KNOW</th> </tr> </thead> <tbody> <tr> <td>1 = Airfare</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>2 = Land transport</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>3 = Accommodation</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>4 = Food and beverages</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>5 = Recreation and entertainment (e.g. payments to a zoo etc)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>6 = Travel insurance</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>7 = Shopping</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> <tr> <td>8 = Other</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 3</td> </tr> </tbody> </table>	INCLUDED	YES	NO	DON'T KNOW	1 = Airfare	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	2 = Land transport	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	3 = Accommodation	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	4 = Food and beverages	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	5 = Recreation and entertainment (e.g. payments to a zoo etc)	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	6 = Travel insurance	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	7 = Shopping	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3	8 = Other	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3
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7 = Shopping	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3																																		
8 = Other	<input type="checkbox"/>	<input type="checkbox"/> 2	<input type="checkbox"/> 3																																		

Check question 4.7 to see how many persons from this household went on this trip.

4.17	Please indicate exactly which members of the household went on this trip
	01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/>

4.16 Read out: Now the following questions relate to package trips.

4.16.1	Was this last overnight trip a package, (where two or more expense items, such as transport and accommodation, were included in an all-inclusive price)?
	1 = Yes <input type="checkbox"/> 2 = No <input type="checkbox"/> 3 = Don't know <input type="checkbox"/>
	→ Go to Q4.17 → Go to Q4.17

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Now thinking about any money spent before the trip on items related to the trip

*Read: I now want you to tell me about the total expenditure before this trip
 : that's all OTHER expenditure for those who have been on a package trip
 if not a package trip, record all the expenses incurred by the other members of your household on the trip*

- include all expenses, even those paid for by another party, for example, the host, employer or company

- please include all tips and taxes

Example : R18 000 should be recorded as follows
 NO "R" sign should be recorded and NO cents are to be recorded

4.18 How much money did other members of your household spend on the following before the trip?	Person number									
	01	02	03	04	05	06	07	08	09	10
01 = Food for the trip										
02 = Gifts										
03 = Travel Insurance										
04 = Other financial services										
05 = Servicing the vehicle										
06 = Checking/servicing alarm system										
07 = Hiring security										
08 = Hiring house sitter										
09 = Clothing										

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	Person number									
	01	02	03	04	05	06	07	08	09	10
10 = Toiletries										
11 = Luggage										
12 = Medical supplies/inoculations										
13 = Electrical appliances e.g. adaptors										
14 = Other, specify.....										
TOTAL										

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Now thinking about any money spent on this trip on items related to the trip

Read: I now want you to tell me about the total expenditure on this trip
 • that's all OTHER expenditure for those who have been on a package trip
 • if not a package trip, record all the expenses incurred by the other members of your household on the trip

- include all expenses, even those paid for by another party, for example, the host, employer or company
- please include all tips and taxes

Example : R18 000 should be recorded as follows
 NO 'R' sign should be recorded and NO cents are to be recorded

4.19 How much money did other members of your household spend on the following on this trip?	Person number									
	01	02	03	04	05	06	07	08	09	10
01 = Airfare										
02 = Train										
03 = Land transport (fuel, kombi, bus tickets, toll fees, parking)										
04 = Car hire										
05 = Accommodation										
06 = Food and beverages										
07 = Recreation/entertainment (sports, game parks and amusement parks)										
08 = Cultural services (performing arts/ museums)										
09 = Medical expenses										

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		Person number									
		01	02	03	04	05	06	07	08	09	10
Category	Description										
10 = Shopping											
11 = Tour guide											
12 = Other, specify.....											
		TOTAL									

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SECTION 5

Interviewer to answer questions below.

GENERAL COMMENTS		
Question Number	Person Number	General Comments
5.1	<i>Indicate the column number of the person who was the respondent throughout the questionnaire</i>	
5.2	In what language was most of the interview conducted?	
<p><i>Mark only ONE response</i></p> <p>01 = Afrikaans 02 = English 03 = Isindebele/South ndebele/North ndebele 04 = Isixhosa/Xhosa 05 = Isizulu/Zulu 06 = Sepedi/Northern sotho 07 = Sesotho/Southern sotho/Sotho 08 = Setswana/Tswana 09 = Siswati/Swazi 10 = Tshivenda/Venda 11 = Xitsonga/Tsonga 12 = Other, (Specify)</p>		

INTERVIEW END TIME

h h m

End of interview

Thank the respondent for his/her co-operation

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