

## PROGRAM GOALS AND EXPECTATIONS

Please answer the following questions and return this form with your contract so that we may effectively plan your program.

Organization:

Program Date:

Representative Name:

Phone #:

# of Participants:

To help us plan the program, please provide a participant profile:

Why are you choosing to participate in the Challenge Center experience?

How do the participants interact on a daily basis?

What are some positive/effective ways participants are currently interacting with one another?

What are some areas of participant interaction that need attention?

What percentage of the day do you want spent on "low elements" (team building activities)? \_\_\_\_\_ %

What percentage of the day do you want spent on "high elements" (climbing activities)? \_\_\_\_\_ %

What percentage of the day do you want spent on debrief, discussion and reflection? \_\_\_\_\_ %

What changes/transformations would you like to see at the end of the program?