



# Challenge Center Program **Goals and Expectations**

Thank you for booking a program at the Peak Adventures Challenge Center!  
**Please answer the following questions so that we may effectively plan your program.**

Organization		Program Date	
Main Contact Name		Number of Participants	
Phone Number		What is your preferred time for a 30 minute lunch break (Full Day programs only)	
Will this contact be present the day of your program?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
If no, please provide the direct contact who will be present			
Program Contact Name			
Phone Number			
How will you be arriving the day of your program? (EX. bus, lightrail, car)			

What would like to be the focus of your program? Please mark up to 3:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Communication     | <input type="checkbox"/> Trust               | <input type="checkbox"/> Positive Risk Taking |
| <input type="checkbox"/> Decision Making   | <input type="checkbox"/> Compassion          | <input type="checkbox"/> Confidence           |
| <input type="checkbox"/> Teamwork          | <input type="checkbox"/> Respect             | <input type="checkbox"/> Reliability          |
| <input type="checkbox"/> Leadership Skills | <input type="checkbox"/> Adaptability        | <input type="checkbox"/> Goal Setting         |
| <input type="checkbox"/> Integrity         | <input type="checkbox"/> Fun                 | <input type="checkbox"/> Delegation           |
| <input type="checkbox"/> Critical Thinking | <input type="checkbox"/> Conflict Resolution | <input type="checkbox"/> Accountability       |

Provide a description of your group's relevant demographics. (For example: age range, physical stamina, grade level, etc..)

What is the common mode and frequency of communication? (email, text, phone, in-person, etc...)

How do the participants interact with one another? What are some areas of participant interaction that need attention?

Are there any organizational core values, specific phrases, or terminology you'd like us to incorporate into the program?

Are there any participants that require accommodations? (For example, cultural restrictions, participant injuries, participants with disabilities, language barriers, etc.) If so, please elaborate.

What expectations do you have for your program and what goals would you like to see achieved by the end of the program?

What percentage of the day do you want spent on the following:

Activity	% of Day
<b>Low Activities:</b> Takes place on the ground, consists of a series of tasks designed to challenge groups and individuals to work together to accomplish a common goal.	%
<b>High Activities:</b> Climbing activities that take place off the ground.	%
<b>Debrief:</b> Discussion on how the observations from the activities apply to a real-world setting, like the office, classroom, or team.	%

**Please return this form with your contract**