

130 Austine Drive Brattleboro, VT 05301 802-254-8718/802-251-7203 fax www.high5adventure.org

Program Information

The more we know about your group, the better equipped we will be to design a program and choose activities that address your group's purposes for participating. Please be specific when filling out this form. Feel free to use the reverse side if more space is needed.

Program Contact Person Program Group Name:

& Phone Number:

Number of Participants: Date(s) and Time(s) Requested:

Background:

Please tell us about the nature of your group, how long has the group been together; what dynamics exist within the group that may have an impact on its experience?

Prior Experience:

Please describe any team building or experiential activities this group may have done prior to this workshop.

Goals:

What do you wish to accomplish with your group via an adventure experience? These might include: communication, team building, quality, empowerment, problem solving, among others.

Special Requests:

Please explain any special requests or needs your group may have.

Next Steps:

How does your organization plan to follow up on this experience?