GROUP PROFILE FORM FOR ROPES COURSE

Name of Group_____

Program Dates_____ Ropes Course Date(s) _____

Age of Group_____

Will your group be using the: High Ropes Low Ropes Climbing Wall (circle)

Has your group participated previously in a Ropes Challenge Activity? Yes No

If so, when? _____

Each Ropes program should have some established goals and objectives that support the focus of your stay at the Monte Toyon. Our staff will develop a Challenge Course activity tailored to assisting with your overall program goals. To help our staff prepare for your Ropes Activity, explain how utilizing the Ropes Course/Climbing Wall will support your stay at Monte Toyon.

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

A reminder- Send in advance or bring the Waiver/Liability forms.

No one is allowed to participate in the Challenge activities without a completed and signed waiver/liability form.