# CENTRAL WASHINGTON UNIVERSITY
## CHALLENGE COURSE
### PRE-PROGRAM REQUEST FORM
(Please print and fill out completely)

### General Information:
- **Organization:**

- **Authorized Representative/Contact:**

- **Address:**

- **Box:**

- **Preferred Telephone:**

- **E-Mail:**

- **Preferred Method of Contact:**

### Programming Requested:
*Please refer to Group Program Usage for details on program types.*

- **Type of Event:**
  - [ ] 2 hr Low Course
  - [ ] 3 hr Tower Challenge
  - [ ] 4 hr High Course
  - [ ] 6 hr Combo Course

- **Type of Group:**
  - [ ] CWU Student
  - [ ] CWU Fac/Staff
  - [ ] Visiting

### Dates Requested:
*Please list at least 2 possible dates for your event.*

**1st Choice:**
- **Date:**
- **Start Time:**
- **End Time:**

**2nd Choice:**
- **Date:**
- **Start Time:**
- **End Time:**

### Payment Information:

- **Method of Payment:**
  - [ ] Check
  - [ ] Cash
  - [ ] Credit
  - [ ] Charge Credit
  - [ ] Purchase Order

If paying by on campus charge credit, please list the budget information:

- **Budget #:**
- **Budget Name:**

All payments must be made to Central Washington University
By answering the following questions, our facilitators will have the opportunity to design a program which is specific to your group’s goals. These answers will be reviewed with you in a pre-event phone call and must be returned to Outdoor Pursuits and Rentals at least two weeks prior to your program.

1). How many members are in your group? ______________

2). How long have the members of your group known each other? ______________

3). Are there specific goals / outcomes that your group would like to achieve through your challenge course experience? If so, what are they?

_______________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

4). Are there any members of your group who have any physical limitations which would prevent them from climbing a flight of stairs? ______________ If Yes, please describe these limitations.

___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

5). Are there any other group dynamics of which our facilitators should be aware as we design this program for your group?

___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

6). Is there anything else we should know as we arrange a great day of programming for your group?

___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Please return this completed form to the Challenge Course Coordinator at least one week prior to your program date. This form can either be e-mailed or faxed to the contact information below. As always, we are more than happy to discuss more details over the phone.

As the representative for the group and event requested on this form, I understand that all participants must read, understand, complete and sign a HOLD HARMLESS AND ACKNOWLEDGEMENT OF RISK AGREEMENT. I further understand that all deposits paid to reserve this program are non-refundable.

Representative’s Signature: ___________________________ Date: ______________

Please Return Completed Form to:

Central Washington University
University Recreation, Outdoor Pursuits & Rentals
Fax: (509) 963-3515, e-mail: challenge@cwu.edu
400 E University Way, Recreation Center MS 7448
Ellensburg, WA 98926-7448