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Challenge Course Program Group Information Questionnaire

We would like to know a little about your group before you arrive to help us in the planning. Please fill out the following form and return it to us at least 1 week before your Challenge Course Session. We encourage you to discuss the form with your group.

Name of your Group: _____ Date of your Session: ____/____/____

Group Leader Name: _____ # of Leaders _____

Group Information:

Type of Group: _____ Age Range of Group: _____

How long has your group been together? _____

What overall goals does your group have? _____

What types of adventure/challenge activities has your group participated in? _____

Have you been through Tel Hai Camp's Challenge Course before? _____ Yes _____ No

What strengths do you see in your group? _____

What areas of improvement does your group need? _____

What goals does your group have for this challenge course session? _____

What is the one main thing you would like your group to take home with them from this session? _____

On the back, please tell us anything else about your group that you feel would be helpful to us as we plan for your Challenge Course Session.