

## Project Great Outdoors Program Application

Thank you for your interest in Project GO's educational outdoor adventure programs. To ensure that our programs are complimentary and mutually beneficial, please take the time to provide complete answers to this very short application. If you have questions about this application, please e-mail [info@projectgo.org](mailto:info@projectgo.org) or call (888) 827-8859.

### Contact Information

Your Name and Title \_\_\_\_\_

Name of Organization \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

### Group Information (If necessary, please respond on a separate sheet of paper)

1. Please tell us about your organization. What are your goals? How are participants brought into your program? Please submit any promotional material you may have along with your application.
2. Please describe the demographics of the group that will be participating.
3. Why are you interested in Project GO's programs? What do you hope to accomplish through participation? Check all that apply and elaborate on an additional sheet. The information you provide will help us tailor our program to your particular needs.
  - Exposure to the Outdoors/Outdoor education
  - Build Teamwork/Leadership Skills
  - Build Self Confidence/Reliance
  - Reward for achievement of milestone
  - Fun
  - Specific curricular interest: \_\_\_\_\_
4. What percentage of participants is eligible for free/reduced price lunches?
5. How will your group travel to the program location?

### Program Information

6. Please indicate the programs in which your group is interested.
  - Whitewater Rafting
    - a. Number of youth: \_\_\_\_\_ Number of adult chaperones (minimum 1-5): \_\_\_\_\_
    - b. Please indicate your preferred dates:
      - 1<sup>st</sup> Choice \_\_\_\_\_ or...  We're flexible, weekdays preferred
      - 2<sup>nd</sup> Choice \_\_\_\_\_  We're flexible, weekends preferred
  - Challenge Ropes Course
    - a. Number of youth: \_\_\_\_\_ Number of adult chaperones (minimum 1:10): \_\_\_\_\_
    - b. Please indicate your preferred dates:
      - 1<sup>st</sup> Choice \_\_\_\_\_ or...  We're flexible, weekdays preferred
      - 2<sup>nd</sup> Choice \_\_\_\_\_  We're flexible, weekends preferred

*Please mail your completed application to: Project Great Outdoors, PO Box 1385, Sacramento, CA 95812*