



## ***Teams Challenge Course and GeoTeam Challenge Course Planning & Goal Questionnaire***

**Group Name:** \_\_\_\_\_ **Course Date:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Instructions: Please complete this questionnaire and send it back to the Barrington Park District, 235 Lions Drive, Barrington, IL 60010, FAX (847) 381-8794 or TeamsCourse@BarringtonParkDistrict.org. This information will help the facilitators design an appropriate team building experience for your group.

1. Describe your group (include how well individuals know each other).
  
  
  
  
  
  
  
  
  
  
2. Briefly describe the 3 greatest strengths of your team.
  
  
  
  
  
  
  
  
  
  
3. What does your group do that requires teamwork? And how frequently?
  
  
  
  
  
  
  
  
  
  
4. Briefly describe the 3 most pressing issues which your team currently faces.
  
  
  
  
  
  
  
  
  
  
5. What 3 changes would you recommend to your team to improve its performance?

**Please indicate the top 5 goals for your Teams Course experience in numerical order, with #1 being the most important:**

- |   |   |
|---|---|
| _____ Decision-making/ problem solving strategies   | _____ Commitment to quality                     |
| _____ Goal Setting                                  | _____ Overcoming divisions in groups            |
| _____ Communication and listening skills            | _____ Trust and respect skills                  |
| _____ Group unity                                   | _____ Leadership                                |
| _____ Increase familiarity with others within group | _____ Gain self-awareness of specific abilities |
| _____ Overcome fears                                | _____ Try something new                         |
| _____ Integrity                                     | _____ Other (please describe) _____             |

***Barrington Park District, 235 Lions Drive, Barrington, IL 60010      Main Office: (847)381-0687***

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