



## ***Teams Challenge Course and GeoTeam Challenge Course Reservation Form***

Name of Contact: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ City / Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Desired Date: \_\_\_\_\_ Back-up Dates: \_\_\_\_\_

Check Desired Program:      Teams Course      GeoTeam Challenge      Combo of Teams and GeoTeam

Arrival Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Age / Grade Level of Participants: \_\_\_\_\_

Will Participants need a Lunch Break? \_\_\_\_\_ If yes, desired time: \_\_\_\_\_

Special Needs and Requests:

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You will receive a written confirmation, an invoice, a required waiver form and an Information Guide once your application has been processed.

### **For Internal Use Only**

Waiver, P&G, Info. Guide Sent \_\_\_\_\_

Invoice \_\_\_\_\_

Planning/Goal Rec'd \_\_\_\_\_

Payment Rec'd \_\_\_\_\_

Facilitators Booked \_\_\_\_\_

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

***FAX: (847) 381-8794    TeamsCourse@BarringtonParkDistrict.org***