

Program Request Form

This form is to help determine which activities you want your students to experience. Please fill out all information below.

Group Name: _____ **Contact Name:** _____

Date of Visit: _____ **# of Participants:** _____ **Grade:** _____

Arrival Time: _____ **am/pm** **Departure Time:** _____ **am/pm**

**Arrival and Departure Times, please be as accurate as possible.*

Program Choices (please circle your choices)

Core Options (Rotations):

<input type="checkbox"/> Initiative Games/ Team Building Activities	<input type="checkbox"/> Low Ropes
<input type="checkbox"/> Ice Skating	<input type="checkbox"/> Climbing Wall
<input type="checkbox"/> Cross Country Skiing	<input type="checkbox"/> Vertical Playground
<input type="checkbox"/> Snowshoeing	

Additional Options:

Evening Programming:

<input type="checkbox"/> Outdoor Cooking	<input type="checkbox"/> Varitey Show (Talent Show)
<input type="checkbox"/> Quinzee Building (two day program)	<input type="checkbox"/> Campfire
<input type="checkbox"/> Snow Soccer	<input type="checkbox"/> Skit Night
<input type="checkbox"/> Capture the Flag	
<input type="checkbox"/> Survivor	

Requests/Other (Please specify): _____

Special and unique touches for your group (ex. BBQ Lunch): _____

When all information is filled out, please sign below and send back to RKY Camp as soon as possible. You can fax it to RKY Camp at 613-375-6295 (call first), or email it to adventure@rkycamp.org

We will then use this information to create a schedule for your group. **A copy of that schedule will be sent to you for your approval.**

THANK YOU

Sign: _____ Date: _____

Reminder:

As stated in the opening letter, groups visiting RKY Camp will be invoiced for a minimum of 90% of the last confirmed number of students from one month prior to trip date.

As of _____, there are _____ confirmed students.
(Date) (Number of students)