



CHECK LIST | GOAL SHEET | EVALUATION FORM

CHECK LIST:

Make sure you brought all of your equipment! If you are missing any of the items listed below, you will need to go to Rental & Retail in the Village prior to registration:

- Snowboard or Skis and poles
- Boots
- Helmet
- Goggles
- Gloves
- Pads (if planning to skateboard, bmx, or in-line skate)

Emergency Contact Information:

Name _____ Relationship _____ Phone _____

Alternate Emergency Contact Information:

Name _____ Relationship _____ Phone _____

Medications _____

Food Allergies _____

Drug Allergies _____

Special Notes _____

Authorized Pick-Up (may be waived if 13 years or older) _____

GOAL SHEET – Please circle your answer below.

Name _____ Age _____ Date _____ Sport _____

What is your skiing/riding ability level: Green Blue Black diamonds

How much time do you spend riding the Park: Never Sometimes All the time

How much time do you spend riding the Halfpipe: Never Sometimes All the time

Have you done gymnastics before: Yes / No Have you been on a trampoline before: Yes / No

What do you want to learn today? _____

Have you attempted any of these tricks before? _____

What is your best trick:

- Off a jump _____
- In the halfpipe _____
- On a box or handrail _____

What is your long-term goal in snowboarding or skiing? _____

Have you been to Woodward at Copper before: Yes / No



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CAMP EVALUATION

Did you learn any new tricks? Yes No

If so, which tricks did you learn?

The Barn: _____

The Mountain: _____

Evaluate your Camp Day group: Coach's name _____

1. Worked New Skills	None	Some	A lot	Millions
2. Showed Interest	None	Some	A lot	Millions
3. Had fun	None	Some	A lot	Millions

Please rate the following on a scale of:

4. The Trampolines	Lame	Okay	Good	Awesome
5. The Snowflex	Lame	Okay	Good	Awesome
6. The Bowl	Lame	Okay	Good	Awesome
7. The Mini-ramp	Lame	Okay	Good	Awesome
8. The Halfpipe	Lame	Okay	Good	Awesome
9. The Terrain Parks	Lame	Okay	Good	Awesome
10. The Cage	Lame	Okay	Good	Awesome
11. The Food	Lame	Okay	Good	Awesome

What did you like most about camp? _____

Which Staff member did you learn the most from? _____

Who was your favorite Staff member? _____

What was your favorite activity? _____

What would you like added or improved at camp? _____

Would you like to come back for a week-long summer camp? _____