



ADVENTURE MAS!

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WELCOME AND TRAINING EVENT ITINERARY AT CAMP WYONEGONIC

**PLEASE READ BEFOREHAND AND BRING THIS FULL DOCUMENT
WITH YOU TO THE TRAINING COURSE!**

DATES:

Low Ropes Course Facilitator: June 1st starting at 9am – June 3rd finishing at 5pm

High Ropes Course Facilitator: June 4th starting at 9am - June 7th finishing at 5pm

Climbing Wall Facilitator Training: June 8th 9am-5pm

TIME: Approximate times for sessions each day are 9:00 AM to as late as 9:00 P.M. with appropriate meal and general breaks. The candidate group will help in the selection of what time interval best serves the needs of the training events.

This training course is designed to meet the Standardized National Training Scheme for facilitators contained in the **ANSI/PRCA 1.0-.3 – 2014, Section 1.3** the American National Safety Standards for Challenge Courses; the only recognized safety standards for the industry. This means that you are being trained and certified to an American National Safety Standard which requires the same training for everyone in the country. Certifications are good for two years and are issued through your Camps after being signed off on as having successfully completing the training and assessment event.

The position titles from the ANSI American National Safety Standards are:

Ropes Challenge Course Administrator / Director

Ropes Challenge Course Facilitator/Guide Level 2 (Highest facilitator level for both low and high courses.)

Ropes Challenge Course Facilitator/Guide Level 1 (Basic level for both high and low courses.)

High Ropes Challenge Course Facilitator/Guide Level 1 (Basic level for high courses only used for climbing wall certifications also.)

Low Ropes Challenge Course Facilitator Level 2 (Highest facilitator level for Low courses only.)

Low Ropes Challenge Course Facilitator Level 1 (Basic facilitator level for Low courses only.)

ADVENTURE MÁS! INSTRUCTOR(S):

Mike Barker: Lead Instructor/Evaluator (PRCA Certified Qualified Instructor). Mike has been involved in the industry performing training, facilitation, course operations, building, and inspecting since 1978. Mike is currently the President of the Professional Ropes Course Association, is an assessor for the PRCA's Accreditation program, and an instructor for Qualified Instructor Certification Program. Mike is also the principal editor for the ANSI American National Safety Standards for the industry. To contact Mike with any questions please call (203) 464-9784 or email Climb1guide@gmail.com

Jay Potter: Instructor/Evaluator. Jay has served the industry as a facilitator, trainer, evaluator for many years. Jay is a certified BSA COPE Director, and a PRCA Certified Qualified Instructor. Jay has been involved in the construction, maintenance, operation and trainings for multiple Challenge courses.

ADVANCE MATERIAL:

Wyonegonic Camps will be emailing you or providing you with a link to download the ADVENTURE MÁS ROPES/CHALLENGE COURSE FACILITY POLICY AND OPERATIONS MANUAL REV 5-2016. This material is copyrighted so you may not reproduce or disseminate any portion of the manual with the express written permission of Adventure Más. Camps that wish to utilize the material should contact Adventure Más at the numbers in the footer. Participants please review the Chapter 2 sections which relate to the course you are attending (low, high, both). If possible print out the material which relates to the elements on your camp's course and bring it with you to the training event.

PARTICIPANT NEEDS:

Clothing: Participants should wear appropriate clothing and shoes. Clothing that you can move in, a rain coat/poncho, and a hat for hindering the sun's effect are suggested. Shoes should be appropriate for movement; no open toed or open heel footwear (e.g. sandals). All dangling, loose jewelry and sharp objects (pins, combs, watches, and buckles) will need to be removed from pockets and person when participating in activities. Straps can secure eyeglasses, if needed. Bring full rain gear as the rain does not stop us, usually.

Equipment: Bring personal hydration items, note book, pens/pencils.

VERY IMPORTANT High course session participants from courses outside Wyonegonic should bring examples of staff and participant helmets, harnesses, belay devices and other safety equipment (site specific rescue equipment also) if possible.

Documentation: All participants must bring this full document (with the releases completed, do not complete the evaluation form).

Participants from courses outside Wyonegonic are to bring a list of their camps' course elements (high and/or low), and copies of the course's written procedures.

Optional: Insect repellent, sun screen, alcohol hand wash, daypack, camera, etc.

COURSE CONTENT: Each area of training begins with covering a general format of topics relevant to the high or low course facilitation. Topics covered in this workshop are:

Risk Management on the course
 Course construction materials and maintenance
 Course inspections
 Team Games/facilitation
 Spotting techniques (low and high)
 Belaying techniques (high and climbing wall)
 Tying Knots (high)
 High Course set up
 High Course Assists and Rescue
 Proper ladder set-up (low and high)
 Use of self-belay/cable grab for climbing and set-ups (high)
 Belaying on High elements and participant procedure (high)
 From that point on, the training is adapted to meet the unique needs, goals, and experience level of the group.
 Advanced topics will be included for groups with previous experiences; adapted activities and special topics can be presented to maximize the learning experience and further build upon the groups' experience. This training program is designed to build the best foundation for acquiring technical and facilitator skill needed to be an effective facilitator on a challenge course.

GROUP GOALS:

1. To experientially participate in and learn from a team development - peer review experience.
2. To develop a reference for later training presentations and discussions.
3. To review, analyze, and learn from each day's experience
4. To identify the necessary skills, techniques, behaviors, and beliefs for effective facilitation.
5. To create a learning laboratory in the safest conditions that allows an opportunity to increase the effective facilitation skills of each participant.
6. To learn the safe and prescriptive use of new games and experiential initiatives and increase each participant's repertoire of activities for use with targeted populations.
7. To further increase each participants' understanding and perspective of experiential education approaches to philosophy, ethics, and empowerment.
8. To present developed facilitation skills and techniques (metaphors).
9. To begin the process of generalization of skills and materials into existing programs.
10. To develop or further refine strategies for life long personal and professional growth and success.

TOPICS COVERED THROUGHOUT CHALLENGE COURSE TRAINING

(as applicable to the certification sought)

Theoretical basis of adventure based activities.

Brief History of Adventure-Based Activities
 Philosophy of Experiential Education

Ethics of Adventure-Based Programming

Program facilitation skills

Liability Releases
 Participant Medical Information Forms
 Safety and Risk Management

Legal Liabilities of Adventure-Based Programming

Group facilitation skills

Contracting for Behavior and Goals
 Experiential Learning Cycle
 Responsibility and Roles of Facilitators and Groups

Use of Metaphors in Programs
 Group Leadership Skills
 Group Stages of Development

Technical skills

New/Group Games

Stretch Exercises

Initiative Activities

Spotting Techniques

Knots and their Application

Use of Low Elements

Set-up Techniques

Belaying

Use of High Elements

Assist / Rescue Techniques

Technical Aspects of Equipment/Materials

Used

**ADVENTURE MÁS!
MEDIA RELEASE FORM**

Photo/Media Release

I grant to *Adventure Mas*, and persons acting for or through them, the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of myself for use in materials they may create.

DATE _____ SIGNATURE _____

Print Name: _____

Parental Waiver of Claims

Parental permission must be secured for participants who are not of legal age (18 years). If you are not yet classified as a legal adult, your parent(s) or legal guardian(s) must complete the following: I/we (parents' or guardians' name(s)) give per-mission for my/our child (child's name) grant to *Adventure Mas*, and persons acting for or through them, the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of myself for use in materials they may create.

DATE _____ PARENT/GUARDIAN SIGNATURE _____

Print Name of Parent/Guardian; _____

Print Name of Participant: _____

ADVENTURE MÁS
ROPES COURSE RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS
ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT
EXPRESS ASSUMPTION OF RISK ASSOCIATED WITH ROPES COURSES AND
RELATED ACTIVITIES.

(Please read and be certain you understand the implications of signing)

I, _____, do hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with Rope Courses activities, transportation of equipment related to the activities in which I am about to engage. Inherent hazards and risks include but are not limited to:

1. Risk of injury from the activity and equipment utilized in Ropes Courses activities is significant including the potential for permanent disability and death.
2. Possible equipment failure and/or malfunction of my own or others' equipment.
3. My own negligence and/or the negligence of others, including employees, agents, independent contractors or representatives of the Corporate Challenge, Inc. DBA Adventure Mas, including but not limited to instructor error.
4. Injury to hands, fingers, feet, and toes, including but not limited to inflammation and/or strain of muscle ligaments and/or tendons, nerve damage or compression, and broken bones.
5. Injuries from falling may occur from exposure to high altitude, which may affect judgment and coordination, or from not paying close attention to your actions or others with or near you.
6. Broken bones, severe injuries to the head, neck, and back, which may result in severe physical impairment or even death.
7. Discharge of weapons in or near the area of activity.
8. Cold weather and heat related injuries and illness including but not limited to frostbite, heat exhaustion, heat stroke, sunburn, hypothermia, and dehydration.
9. Exposure to outdoor elements, including but not limited to avalanche, rock fall, inclement weather, thunder and lightning, severe and or varied wind, temperature or weather conditions.
10. Attack by or encounter with insects, reptiles, and/or animals.
11. Fatigue, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.
12. My sense of balance, physical coordination, and ability to follow instructions.

I understand the description of these risks is not complete and that unknown or unanticipated risks may result in injury, illness, or death.

RELEASE OF LIABILITY, CLAIM WAIVER, AND INDEMNITY
AGREEMENT.

In consideration for being permitted to participate in any way in Rope Courses activities and related activities, I hereby agree, acknowledge and appreciate that:

1. **I hereby release and hold harmless with respect to any and all injury, disability, and death, or loss or damage to person or property, whether caused by negligence or otherwise, the following named persons or entities, herein referred to as releasees, Owner (Company and/or Person).**
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers, from liability and responsibility whatsoever and for any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from the above activities whether caused by active or passive negligence of the releasees or otherwise. By executing this document, I agree to hold the releasees harmless and indemnify them in conjunction with any injury, disability, death or loss or damage to person or property that may occur as a result of engaging in the above activities.
3. By entering into this Agreement, I am not relying on any oral or written representation or statements made by the releasees, other than what is set forth in this Agreement.
4. This release shall be binding to the fullest extent permitted by law. If any provision of this release is found to be unenforceable, the remaining terms shall be enforceable.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, AND I FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY

AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Date: _____

Signature of Adult Participant: _____

Name of Adult Participant (Please Print): _____

FOR PARTICIPANTS OF MINORITY AGE: This is to certify that I, as Parent, Guardian, Temporary Guardian with legal responsibility for this participant do consent and agree not only to his/her release of all releases, but also to release and indemnify the releasees from any and all liabilities incident to his/her work/environment in these programs for myself, my heirs, assigns, and next of kin.

Date: _____

Minor's Full Name: _____

Signature of Parent or Adult Legal Guardian if Participant is a Minor, and by their signature, they on my behalf release all claims that both they and I have:

Signature: _____

Print Name of Parent or Adult Legal Guardian _____

**DECLARATION OF FITNESS TO PARTICIPATE
IN ROPES COURSES RELATED ACTIVITIES**

I hereby declare that I am physically fit. I do not suffer, and have not suffered, from any of the following conditions, which I understand may lead to a dangerous situation with regard to other persons or myself during Rope Courses related activities:

Epilepsy, fits, severe head injury, recurrent blackouts or giddiness, disease of the brain or nervous system, high blood pressure, lung or heart disease, recurrent weakness or dislocation of any sort, diabetes, mental illness, drug or alcohol addiction, recent back injury, arthritis and severe joint sprains, chronic bronchitis, asthma, rheumatic fever, thyroid adrenal or other glandular disorder, recent blood donation or any condition that requires the regular use of drugs.

I hereby declare that I have no physical or mental condition that should preclude me from participating in my chosen activity, that I am not participating against medical advice or a registered doctor as having a terminal illness has not diagnosed treatment and that me.

I further declare that in the event that I feel ill or unwell, have any physical complaints whatsoever or if an injury is sustained of any kind during the course of ropes course related activities, I will notify the Instructor / Guide / Spotter immediately and before moving any further.

I have read the above Declarations, understand them, and I agree to be bound by them.

Date: _____

Signature of Adult Participant: _____

Name of Adult Participant (Please Print): _____

Address of Participant: _____

Contact Phone Number: _____

Signature of Parent or adult legal Guardian if Participant is a Minor, and by their signature, they on my behalf release all claims that both they and I have:

Date: _____

Minor's Full Name: _____

Signature of Parent or Guardian: _____

Name of Parent or Guardian (Please Print): _____

Address of Parent or Guardian: _____

Contact Phone Number: _____

Adventure Más!

ROPES COURSE ASSESSMENT FORM

(Do Not fill out before course - To be completed on site during the course)

It is important for candidates to remember that ropes course program skills need to be reviewed and practiced regularly to be maintained and improved. The assessor feedback on your form is based on observations of your performance during this workshop. It is reasonable to expect that participants can maintain and improve skill levels demonstrated here with appropriate practice and review. Neither the instructor nor *Adventure Más!* will take responsibility for the behavior and skill level of candidates beyond this workshop.

Candidate Name _____ Date _____

Course Location: _____ Instructor Name: _____

Self-Assessment Rating: (completed by candidate) C: Confident, **U:** Understand Concepts **NC:** Not Confident

Skill Assessment Rating (completed by assessor) P: Pass **F:** Fail **N/A:** Non Applicable **R:** Repeat

The course skill rating scale indicates what best describes the assessment of present skill level in identified area.

A **PASS** rating in any of the areas below signifies that you demonstrated that particular skill and an Assessor(s) witnessed it

| Skill | Self-Rating | L-Low H-High | Skill Rating | Assessor Comment |
|---|-------------|-----------------|--------------|------------------|
| Conduct Participant Safety Briefing specific to course used, | | L-H | | |
| Lead groups in warm-ups/ stretching / games. | | L-H | | |
| Lead groups in initiative activities. | | L | | |
| Lead low ropes course initiatives. | | L | | |
| Be an effective spotter. | | L-H | | |
| Lead group in spotting techniques | | L-H | | |
| Demonstrate proper spotting commands | | L-H | | |
| Demonstrate proper ladder set-up. | | L-H | | |
| Demonstrate Emergency response | | L | | |
| Demonstrate Effective Debriefing | | L | | |
| Inspect course elements for use | | L-H | | |
| Inspect course /user equipment for use | | L-H | | |
| Tie a Killick Hitch | | H | | |
| Tie a Super 8 Knot with Back-up | | H | | |
| Tie a Prussic Loop & Knot | | H | | |
| Demonstrate proper climbing commands. | | H | | |
| Demonstrate PPE and instruct in fitting/use. | | H | | |
| Belay someone as a belay back-up | | H | | |
| Belay using facility belay device | | H | | |
| Belay someone weighing more than you with appropriate back up | | H | | |
| Demonstrate dynamic high element belay. | | H | | |
| Demonstrate use of cable grab system | | H | | |
| Demonstrate use of crab claws for fall protection/Self-belay | | H | | |
| Demonstrate high element set-up / procedures | | H | | |
| Demonstrate high element Assist / rescue techniques | | H | | |
| Belay someone in an rescue situation | | H | | |
| Demonstrate rappel techniques(If applicable) | | H | | |
| Demonstrate rappel belay / procedures. | | H | | |

Candidate Signature: _____

Assessor Signature: _____