



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Mountaineer Backpack Addendum

Name/Pronouns:

As was outlined on the Fact Sheet, much consideration goes into creating trail groups. Please help Widji's counselors and administrators by answering the questions below and sharing your summer availability. **Please return this sheet at the time of registration to Attn. Amy Hadow, Camp Widjiwagan, 3788 N. Arm Rd, Ely, MN 55731 or scan to info@widji.org to be included in the group making process.**

What would you like your counselor and group to know about you to best support you?

Why did you choose to register for a Mountaineer Trip?

What goals do you have for your Mountaineer Trip?

How do you anticipate that a Mountaineer trip will challenge you? How comfortable do you feel with the physical expectations of a Mountaineer trip?

How will you contribute to the success of your Mountaineer group and experience?

Please indicate your date availability.

Please rank these session dates and gender options according to your preferences (1=most preferred-3=least preferred). **Please do not rank options that you cannot attend. Please cross them out instead. We cannot guarantee you will get your top choice but we also will not put you in a session that you cross out.**

Availability (Please Rank)	Session Dates	Length	Rate
_____	6/19 – 8/05	48	\$10,235
_____	6/26 – 8/12	48	\$10,235

Trip Gender preference (Please Rank)		
_____	_____	_____
All Gender	Female	Male

Signature of Camper

Date

Signature of Parent/Guardian

Date

CAMP WIDJIWAGAN
3788 North Arm Rd. Ely, MN 55731
P 651 645 6605 W widji.org

ADMINISTRATIVE OFFICE
651 Nicollet Mall, Suite 500
Minneapolis, MN 55402

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