



Leading E.D.G.E. Facilitation Request Form

Date Received _____ Initial _____
(Must be received at least 2 weeks prior to request date)

Contact Person: _____
Phone: (day) _____ (evening) _____
Email: _____
Faculty/Staff Attending _____
Group Name _____
Number of Participants _____
Date and Time Requested _____
Alternate _____

Course:
Low Ropes Elements

Goals for the session (please circle all that apply):

- | | |
|----------------------------|---------------------|
| Getting to know each other | Communication |
| Trust | Conflict Management |
| Teamwork | Decision-making |
| Problem-solving | Goal-setting |
| Taking positive risks | Additional: _____ |

Any physical limitations: _____

Has your group/organization used our services before? If so, when? _____

Facilitator Preference if any, names: _____

Cancellation Policy

In the event that a group cancels without giving Leading E.D.G.E. staff timely notice (minimum **24 hours** prior to date), you will incur a cancellation fee of \$50. The cancellation fee will be deducted from your organization account. The services of Leading E.D.G.E. are free to student organizations at St. Edward's University and we are happy to provide it; however, it cannot be abused.

It is the policy of the Leading E.D.G.E. facilitators and staff to go to the course on the date requested regardless of the weather condition. If inclement weather is present, we can still generate a program that will have similar results, but conducted indoors. Leading E.D.G.E. staff reserves the right to cancel the course request if there is extreme weather, unsafe condition, or extenuating circumstances beyond control. In the event that this happens, the contact person will be contacted immediately and informed of the situation. We will do everything in our power to get you on the course ASAP.

Contact Information

Director of Leading E.D.G.E. – Willis Yehl: wyeהל@stedwards.edu
Assistant Director of Leading E.D.G.E. Facilitation – Reed Traphagan: jtrapha@stedwards.edu
Student Leadership Team: (512) 448-8420

Office Use Only

Location requested: _____ Special Needs: _____ Facilitator(s) Contacted: _____