## CITY OF PLACERVILLE RECREATION & PARKS DEPARTMENT SPECIAL INTEREST CLASS PROPOSAL

If you would like to offer a class with the City of Placerville Recreation & Parks Department, please complete the following proposal form in its entirety and return it to us at 549 Main St. Placerville, CA 95667 or Fax to: (530) 642-5236. The Recreation Department will attempt to meet your requests; however, if there is a conflict with room availability we will contact you to make any necessary changes. If you teach more than one type of class, please use one form for each class.

NAME:						
ADDRESS:						
CITY:	STATE:	ZIP:				
			Can this number be			
DAY PHONE:						
EVENING PHONE:						
FAX:						
E-MAIL ADDRESS:						
CLASS NAME:						
CLASS DESCRIPTION:						
MINIMUM # OF STU	IDENTS:		MAXIMUM # OF STUDENTS:			
INSTRUCTOR RECO	OMMENDED FEE: S	\$	MATERIALS/LAB FEE: \$			
PROPOSED DISCOUNT	:					
		······				

<u>(Over)</u>

## SESSION INFORMATION

Session #	Start Time	End Time	# of Weeks	Start Date	End Date	Day(s)	Ages
1							
2							
3							
4							
5							
Class will no	ot be held on	the following	g dates:		· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •
Alternative I	Day(s) of We	ek:					
LOCATION	PREFEREN	<u>CE</u>					
Town Hall: Upstairs Small			Upstairs Large		Downstairs Hall		Kitchen
Scout Hall	Othe	er:					
	OM SET UP:						

Please indicate the position of tables, chairs and any audio/visual equipment.

## **EQUIPMENT AND SUPPLIES:**

Please indicate any materials, equipment, or supplies the City will need to supply for this class (electrical outlets, extension cords, fans, etc.)