## 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:	provided to the public?  Yes No				
EVENING PHONE:					
FAX:					
E-MAIL ADDRESS:					
CLASS NAME:					
CLASS DESCRIPTION:					
MINIMUM # OF STUDENTS:	MAXIMUM # OF STUDENTS:				
INSTRUCTOR RECOMMENDED FEE: \$	MATERIALS/LAB FEE: \$				
DRODOCED DICCOLINIT.					
PROPOSED DISCOUNT:					

DOES YOUR CLASS REQUIRE A HANDOUT AT THE TIME OF REGISTRATION? IF SO PLEASE ENCLOSE.

(Over)

## **SESSION INFORMATION**

Session #	Start Time	End Time	# of Weeks	Start Date	End Date	Day(s)	Ages
1							
2							
3							
4							
5							

5							
ass will no	ot be held on	the following	dates:				
ernative I	Day(s) of We	ek:					
CATION	PREFEREN	<u>CE</u>					
wn Hall:	Upstairs Sm	all	Upstairs L	arge	Downstairs Hal	I Kir	chen
out Hall	Othe	er:					
	OM SET UP:						
ease indic	ate the positi	on of tables,	chairs and any	audio/visual equ	iipment.		
QUIPMEN	T AND SUP	PLIES:					
ease indic	ate any mate	erials, equipm	nent, or supplies	s the City will nee	ed to supply for t	this class (electri	cal outlets, extens
ords, fans,	etc.)						