



Program Planning Form

Please complete this form and return to Recreation Superintendent, Kelly Hyer at khyer@wbparks.org. You can also request this form to be sent to you electronically.

Also include:

- Instructor Credentials
- References (from current or past classes, especially if you currently teach for another Recreation Department or Community Education).
- Photos

Program proposal forms are due three times per year.

Deadline to Submit Proposal	Seasonal Brochure your Program would appear in	Session Dates (could offer 1, 2 or 3 sessions within these dates)	First Day of Registration
September 15	Winter Brochure	January 15-April 30	December (beginning)
January 15	Spring/Summer Brochure	May 15-August 30	April (mid)
May 15	Fall Brochure	September 15-December 31	August (beginning)

Complete the information below to the best of your ability. If you are already teaching a class for someone else and want to duplicate that same program, simply attach the current information you are using.

PROGRAM NAME: _____

PROGRAM DESCRIPTION (Limit to three sentences or 50 words. If you do not, we will edit it down.):

PROGRAM BENEFITS TO THE PARTICIPANT: _____

MATERIALS THAT PARTICIPANTS NEED TO BRING TO CLASS:

AGE GROUP (For Camps, can only combine 2 of the age groups below and cannot check all "youth" boxes; must gear camp to a specific audience):

Preschool (4 and under, not yet in Kindergarten)
 Youth, grades K-2
 Youth, grades 3-5
 Teens, grades 6-7
 Teens, grades 8-9
 Teens, grades 10-12
 Adults (Choose: 16+, 18+, 21+)
 Family (all ages)
 Seniors (55+)
 Other: _____

PROPOSED LOCATION: _____

(Revenue sharing percentages are dependent upon the location of the class. If you will be teaching within a West Bloomfield Township facility, the revenue split is 60/40, 60% to instructor/40% to WBPR.)

ROOM SET-UP-Do you have any special room set-up requests?

EQUIPMENT-Do you have all of the equipment needed? Any equipment requests?

PROPOSED CLASS FEE TO BE ADVERTISED TO THE PUBLIC: _____

(Include any material fees, or list material fee separately that would be asked to be paid at the beginning of class by each participant. For example, if the advertised cost of the program is \$50 per person, 60% of the \$50 would go to the instructor and 40% would be kept by WBPR.) Please be aware that late registration fees and non-resident fees paid by participants at the time of their registration are fees that are NOT passed on to instructors, nor are these fees allocated in the percentage split.

MINIMUM # OF PARTICIPANTS NEEDED TO HOLD THE PROGRAM: _____

MAXIMUM # OF PARTICIPANTS NEEDED TO HOLD THE PROGRAM: _____

PROPOSED START DATE/TIMES:

	SESSION 1	SESSION 2	SESSION 3	<i>Example:</i>
Day of the Week				<i>Mondays</i>
Starting Date				<i>January 25, 2016</i>
Any Skip Dates? Holidays, Scheduled Instructor Absences				<i>2/15 Mid-Winter Break</i>
End Date				<i>February 22, 2016</i>
Total # of Weeks				<i>4</i>
Start Time				<i>6pm</i>
End Time				<i>7pm</i>
Total # of Minutes or Hour(s) Per Week				<i>1hour</i>

OTHER NOTES:

CONTACT INFORMATION:

NAME OF PERSON COMPLETING THIS FORM: _____

EMAIL: _____ CELL: _____

Will you be the main contact for this class? Will you be instructing the class too?

NAME(S) OF LEAD INSTRUCTOR: _____

(If different from above.)

EMAIL: _____ CELL: _____

Do you want any of the following items listed on our online registration system?

__ Email? Yes No If yes, what email address? _____

__ Phone? Yes No If yes, what phone number? _____

__ Website? Yes No If yes, what website? _____

Please see form due dates on the front of this form. Please also include the additional information requested.

Program proposal forms are reviewed within 7 days of submission. If approved, here are the following steps:

1. You will be assigned to a Parks and Recreation programmer.
2. You will receive background check forms for each instructor to complete and return.
3. You will receive Instructor Handbook to read, with an "Acknowledgement Form" for each instructor to complete.
4. Once a successful background check(s) is completed and cleared, a blank Contractual Services Contract will be issued.
5. Once the signed Contract has been returned, your information will be submitted in our next registration cycle including registration system and Marketing staff. Facility will be booked if applicable.
6. You will be asked to complete a W9 prior to the start of your program.
7. You will be asked to provide a copy of your worker's compensation insurance (only if your employees are conducting the class for you).
8. You will be asked to provide a copy of your liability insurance (however, not required) and WBPR should be named as an "additional insured".

Please complete and return to:

Kelly Hyer, CPRP, Recreation Superintendent West Bloomfield Parks and Recreation Commission

www.wbparks.org

4640 Walnut Lake Rd, West Bloomfield, MI 48323

Main Office: 248-451-1900 Direct Line: 248-451-1910 Fax: 248-738-2529