

North Highlands Recreation and Park District

Recreation Program Proposal

Please complete one set of forms for each class proposal and return to the Recreation Department. CONTRACTOR INFORMATION Contact Name Business Name Address City Phone (Alternative) Email ACTIVITY INFORMATION Proposed Program Name/Title Class Category Toddler Youth Teen Adult Senior Age Range: How long is the activity? How long do you need to set up?	SEASON PERIOD: Spring (March-May) Summer (June-August) Fall (September-November) Winter (Dec February) Information must be submitted at least three months prior to the first month; ie – classes for summer must be submitted by March.											
Contact Name Address City Phone (Main) Email City Phone (Alternative) Website (If applicable) ACTIVITY INFORMATION Proposed Program Name/Title Class Category Toddler Youth Teen Adult Senior Age Range:	Please complete one set of forms for each class proposal and return to the Recreation Department.											
Address City Zip Code Phone (Main) Email Website (If applicable) ACTIVITY INFORMATION Proposed Program Name/Title Class Category	CONTRACTOR INFORMATION											
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Phone (Main) Email ACTIVITY INFORMATION Proposed Program Name/Title Class Category		Zip Code				City				Address		
ACTIVITY INFORMATION Proposed Program Name/Title Class Category										Phone (Main)		
Proposed Program Name/Title Class Category										Email		
Class Category	ACTIVITY INFORMATION											
Todali I Todali II Todali II Adali II Odilio Age Hange.									m Name/Title	Proposed Prograi		
How long is the activity? How long do you need to set up?			Age Range:	Senior	Adult [☐ Teen	☐ Youth	☐ Toddler	Class Category		
			ed to set up?	do you ne	How long o				activity?	How long is the a		
# Of Times Per Week # Of Weeks for the Season			Season	# Of Times Per Week # Of Weeks for the Season						# Of Times Per W		
Enrollment Minimum Enrollment Maximum			n	Enrollment Minimum Enrollment Maximum								
Instructor to Participant Ratio												
Suggested Program Cost (District makes final cost determination) What You Expect to be Paid (Pertains to the fee that you expect to receive for the entire program)		(Pertains to the fee that you expect to receive				_						
ACTIVITY PREFERENCES												
<u>1ST CHOICE</u> <u>2nd CHOICE</u> <u>3rd CHOICE</u>	3 rd CHOICE				2 nd CHOICE		2		ST CHOICE	<u>1</u>		
Times to Times to to		to	Times		to		s	Times	to	Times		
Day(s) Day(s)			Day(s)			;)	Day(s)		Day(s)			
Date(s) Date(s)			Date(s)				s)	Date(s)		Date(s)		
FACILITY INFORMATION												
Is North Highlands Recreation & Park District providing the facility/park site for your program?)											
If the program is in NHRPD Facility, indicate what you need (Mark all that apply below)		elow)	all that apply be	ed (Mark	what you ne	ndicate	PD Facility, ir	rogram is in NHRPI	If the p			
Community Center (61 or more people) ☐ Recreation Center (60 or less people) ☐ Gym ☐ Outdoor/Park Space ☐ Chairs (Quantity:) ☐ Tables (Quantity:) ☐ Other:	ace	Outdoor/Park Spa	:									
Please note: Instructors are required to do their own set-up and clean-up at the facility. For program facilities not provided by North Highlands Recreation and Park District, please list the address and phone number of the you are utilizing and any additional information we should know:												



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CPR/AED CERTIFICATION

North Highlands Recreation and Park District

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Recreation Program Proposal

INSURANCE

Expiration		Expiration		Expiration							
Please Note: All instructors must have current certifications by the first day of the program. Copies of all certifications must be on file with the Program Supervisor.											
Experience/background in proposed class/activity:											
Experience working with public and particular age groups targeted for this class/activity:											
Description of Program (as you would like to see it in advertising):											
Program Goals/Objectives (list a minimum of 3)											
If you have any additional class information, notes or comments, please provide them below:											

CERTIFICATIONS

FIRST AID CERTIFICATION

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Proposals are subject to approval by the Recreation Division. Please submit by email at recreation@nhrpd.org or submit a physical copy into the front office at 6040 Watt Ave. North Highlands CA 95660.