



CLASS & CAMP PROPOSAL FORM

Note: Please provide separate forms for each class or age group.

DUE BY: _____

Please return form to: _____

INSTRUCTOR INFORMATION

First Name: _____ Last Name: _____ M.I. _____

Name of Business or Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Home/Business Phone: _____ Mobile: _____

Email: _____ Website: _____

To whom should checks be payable? _____

***Make sure name and address match W9 submitted.*

Please Select One: Individual Business

CLASS DETAILS & PREFERENCES

Session Dates: _____

Programs Viewable Online: _____ Registration Opens: _____

CLASS DESCRIPTION

Proposed Class Title: _____

Class Description: *(include benefit statements and "you" language. 80 words maximum. Class descriptions online will include your contact information, including name and email. Descriptions may be sent separately in a Word document if additional space is needed.)*

CLASS INFORMATION

Min. Age: _____ Max. Age: _____

Min. Class Enrollment: _____

Max. Class Enrollment: _____

***Mill Valley Recreation Min. is 5. You may request a lower min. for your programs.*

***Max. may be changed due to programming space.*

Class Day(s) <i>(Mon, Tues, etc.)</i>	Class Start/End Date(s)	Class Start/End Time(s)	List No Class Dates <i>(Holidays and/or minimum days)</i>	# of Class Meetings <i>(Total # of weeks X total # of class days - holidays)</i>	Course Fee Per Day <i>(You will receive a % of this dollar amount)</i>	Class Total Fee	Course #

Shared revenue is based on percentage in your contract. Please contact us if you are unsure of your percentage.



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INSTRUCTOR EXPECTATIONS

- Live scan (fingerprint): ALL Independent Contactors must complete a Livescan with the City of Mill Valley (courtesy of the City of Mill Valley) if instructing minors (under the age of 18). This pertains to both Virtual and In-Person instructors.
- TB clearance (every 2 years): If working in-person with minors (under the age of 18), proof of TB clearance required at instructor's expense.
- W9: All contractors must provide an updated W9 and resubmit if any information has changed. Note: Checks will be issued to the name and address listed on the submitted W9.
- All payments will be provided by NET 30 from the final day of instruction of the current session.
- It is the instructor's responsibility to communicate directly with customers regarding course information, including: curriculum, materials, absences, etc.

SIGNATURE

Signature: _____ Date: _____

We will be in contact upon proposal review. Thank you for your interest.

OFFICE USE ONLY

Date Received	Staff Initials	Rec Pro Entry	Staff Initials
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