

Continuing Program Application



A continuing instructor has already proposed a program that has been accepted and offered through the RDOS. They have completed relevant documentation (Criminal Record Check, Certifications, etc.) and are applying to offer the program again in the next session.

**Please note that while we appreciate your application, there are factors to consider when setting up programs, such as variety, age, and logistics of space, and as a result there are times when not all programs can be accepted.

Contact information First and Last Name: Email: Address: Home Phone: Work Phone: Cell Phone: Program Information Program Title: Facility/Location: Bay(s) of the week: Class start time: Class start date: Session 1 start date: Session 1 start date: Session 2 start date: Session 3 start date: Session 4 start date: Session 5 start date: Session 9 start date: Session 9 start date: Session 9 start date: Skipped dates (example: stats) Minimum Age: Minimum Age: Setup and take down time required? Please list equipment required? Maximum # of registrants? Maximum # of registrants? Does the program require any additional fee for supplies or training materials (i.e. manual). If yes, how much? What do you want to be compensated for this service? (Flat rate amount, or revenue split, volunteer, etc.)? Insurance: Do you have your own insurance coverage? WCB: Do you have your own WCB coverage? If so what is he number Other comments:				
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