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:		Room:	
Day(s) of the week:			
Class start time:		Class end time:	
Session 1 start date:		Session 1 end date:	
Session 2 start date:		Session 2 end date:	
Session 3 start date:		Session 3 end date:	
Skipped dates (example: stats)			
Minimum Age:		Maximum Age:	
Setup and take down time required?			
Please list equipment required.			

Budget	
Suggested per class or session registration fee?	
Minimum # 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 the number	
Other comments:	