

## Dear Prospective Instructor:

Thank you for your interest in teaching classes with Woodinville Parks and Recreation. The City is always seeking qualified Instructors and/or Service Providers to reach our recreational service goals. It is our goal to provide classes and programs that enhance quality of life and meet recreational interests in the community.

This New Class Proposal Form helps walk you through details in proposing your idea. Please read through the New Class Proposal form and consider the following questions before you begin filling out the form:

1. Will your class enhance recreational, social and/or educational needs within the community?
2. Is your class, activity or one like it currently being offered with Woodinville Parks and Recreation? (See the RecGuide listing of current class offerings: [www.ci.woodinville.wa.us/Play/RecreationGuide.asp](http://www.ci.woodinville.wa.us/Play/RecreationGuide.asp).)
3. Will your proposed class fee fall within the range of current class fees listed in the latest RecGuide?
4. Is your proposed class offered at market rate\* compared to local private sector classes of this type?  
*\*The City subsidizes recreation services and classes to reduce customer costs, thereby facilitating access for all income levels. Further, the City shares revenues and adds a Non-Resident Fee to classes so looks for listed costs to remain at or below those offered independently. We look for Service Providers who can support these program considerations and philosophy.*
5. Can you meet your desired profit goals given your proposed class fee with revenue sharing? (see below)
6. Is this class in demand in the Woodinville area? If so, please provide supporting information.

By offering a program through Woodinville Parks and Recreation we offer:

- 1) Facility space for your program, including priority availability of classroom(s), gymnasium and fields.
- 2) Marketing of your program in the Recreation Guide (mailed to 98072 homes), on the City website, in various Flyers, monthly Newsletters and periodic Press Releases. Marketing will vary by program.
- 3) Registration, including web Registration: <http://econnect.ci.woodinville.wa.us/eConnect/Start/Start.asp>.

Most paid contracted Service Providers will be required to have the necessary insurance to offer a class or program, including a Certificate of Insurance listing the City of Woodinville as additional insured. If working with minors, specialized recreation or seniors a criminal background check may also be required.

Generally, there are a couple ways Woodinville Parks and Recreation can offer your program idea.

	<b>Options 1 &amp; 2*</b>	<b>Option 3*</b>
Registration Taken by:	City of Woodinville (1) or Both (2)	Service Provider
Marketing Options:	Recreation Guide, Website, Flyers, Newsletters and Press Releases	Recreation Guide, Website, Flyers, Newsletters and Press Releases
Revenue Sharing/Split:	70% to Service Provider	20% to City of Woodinville
Class Location:	Carol Edwards Center, City Park or Service Provider Site	Carol Edwards Center, City Park or Service Provider Site

*\*There may be other class options based on your class and/or business, but a similar revenue sharing model is part of all options.*

### For general reference, our program due dates for RecGuide advertising are:

<b>Session</b>	<b>Months Covered</b>	<b>Proposal Due</b>
Winter	January – March	1 <sup>st</sup> week of September
Spring & Summer	April – September	1 <sup>st</sup> week of January
Fall	September – December	1 <sup>st</sup> week of June

## WOODINVILLE PARKS & RECREATION THANKS YOU FOR YOUR TIME AND INTEREST!



Recreation Program Inquiries:  
 Cole Caplan, Recreation Coordinator  
 425-398-9327 x2302, [colec@ci.woodinville.wa.us](mailto:colec@ci.woodinville.wa.us)

Carol Edwards Center (CEC)  
 17401 133<sup>rd</sup> Ave NE, Woodinville, WA 98072  
 425-398-9327, 425-489-2758 fax

# Woodinville Parks and Recreation **NEW CLASS PROPOSAL**

*(Note: Form is non-fillable. You may copy text, type then email your responses, or print, complete, scan and email. Please answer all questions.)*

Name \_\_\_\_\_ Business Name \_\_\_\_\_

Address \_\_\_\_\_  
Street/P.O. box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Numbers: Home (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Please check the box that applies to your interest in offering classes:

Non-paid: Volunteer       Paid: Contracted Service Provider

If a program is offered through the Recreation Division we may supply participants with your phone number, website or email if they have specific questions about the class. Please initial the appropriate box:

Do not release any of my information to participants.

Release only the following information to participants:

Address     Cell     Home     Work     Fax     Email     Website

## **Proposed Class Outline**      *(Please complete a separate Outline for each program idea proposed)*

Class Title: \_\_\_\_\_

Goals and/or objectives of the proposed class: \_\_\_\_\_

Class Description (used to develop write up for the Recreation Guide):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Registration Options: Who will take registration?

Woodinville Parks and Recreation (1)     Both (2)     Service Provider (3)

Participant Age(s): \_\_\_\_\_

Class is for:  Males  Females  Both

Length of Class (# of weeks): \_\_\_\_\_  
All/Any

Skill Level:  Beg.  Int.  Adv.

Day(s) of the week\*  M  T  W  TH  F  SA\*  SU\*

\*Classes typically offered only during CEC operating hours: <http://www.ci.woodinville.wa.us/Play/CECGeneralInformation.asp>.

Start Time(s): \_\_\_\_\_ am/pm End Time(s): \_\_\_\_\_ am/pm Hours per class: \_\_\_\_\_

Time needed for setup\*: \_\_\_\_\_ Time needed for cleanup\*: \_\_\_\_\_ (\*often limited to 15 min)

Net profit\* you want/need to make? \$ \_\_\_\_\_ Per:  hour  class  session  participant  
*\*Note revenue sharing based on Options (1, 2 or 3) noted above*

Participant Minimum # \_\_\_\_\_ \* (Enrollment needed to make your profit goal given the class fee and revenue split?)  
*\*What is your minimum notice for cancellation? \_\_\_\_\_ days (note: minimum is 2 days to allow notice to participants)*

Participant Maximum # \_\_\_\_\_ (Enrollment that can be support by staffing and room/space you've requested?)

Are parents/caregivers required to stay with the participant  Yes (if yes please explain)?  NO

Does program require pre-requisites?  Yes\*  No *\*If yes, please explain: \_\_\_\_\_*

All materials/supplies for contracted classes are provided by Service Provider (who also collects any Material Fee). Does this class have a Material Fee separate from an enrollment fee? (i.e.: music kit, education package).  Yes\* Fee: \$ \_\_\_\_\_  No

*\*If yes please explain what the customer gets for this fee:*

Who will be teaching this class?  Myself  Employees, name(s) \_\_\_\_\_

Do you need a sink in your room?  Yes  NO Do you prefer the floor be:  carpeted  vinyl/tile

How many tables and chairs do you need? Tables \_\_\_\_\_ Chairs \_\_\_\_\_

Please describe any other facility or equipment\* requests you may have:

\*Equipment Notes:

- TV with DVD/VCR, whiteboard and easel may be available for contracted classes.
- LCD (computer) projector, laptop and other electronics are not available. Plan to bring these items.

- Internet service is currently not available at the Carol Edwards Center.

**Marketing:** What type of publicity do you plan on using to advertise your program?

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**Instructor Information:** Please provide your teaching background and references, and those of your staff.

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At what other locations have you, are you and/or will you be offering this proposed class?

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Do you have your own liability insurance with specifically identified limits of at least:  
“\$2,000,000 Aggregate” and “\$1,000,000 Each Occurrence”?  Yes  No

Do you currently have participants interested in this program?  Yes, how many? \_\_\_\_\_  No

Are there any additional comments/information about your program you would like to add?

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**Attachments:** Please attach the following items to this class proposal if applicable and/or available:

- **Current resume(s)** - including any past experience, paid or unpaid, that qualifies you to teach this program. Please include personal and professional references. Include staff resume(s) as applicable.
- **Business/Class flyers** (promotional material) you have used currently, and/or in the past.

You may mail, fax, walk-in or email your completed New Class Proposal, along with attachments to:

Cole Caplan	Carol Edwards Center (CEC)	425-489-2758 fax
Recreation Coordinator	17401 133 <sup>rd</sup> Ave NE	<a href="http://www.ci.woodinville.wa.us">www.ci.woodinville.wa.us</a>
425-398-9327 x2302	Woodinville, WA 98072	
<a href="mailto:colec@ci.woodinville.wa.us">colec@ci.woodinville.wa.us</a>	425-398-9327	