



**Hayward Area Recreation and Park District**

1099 E Street, Hayward, CA 94541

510.881.6700

[www.haywardrec.org](http://www.haywardrec.org)

Dear Potential Instructor:

Thank you for your interest in offering classes with the Hayward Recreation and Park District (HARD). It is our goal to enhance the quality of life by providing classes and programs that meet the recreational interests and needs of the community.

Our instructors work as independent contractors for the District and are paid a percentage of the registration fees collected at the end of each quarter. Percentages will vary depending on the type of activity offered and facility space and time that is needed. The average percentage is a 60/40% fee split with 60% going to the instructor.

Following is a "New Class Proposal" form. Please read it over carefully and consider the following questions:

Is the program going to enhance recreational, social and educational needs?

Will the program provide adequate financial return if it is offered, while still remaining reasonable to the participant?

Is the program currently offered by HARD? Would your proposed program be a duplication or in direct competition with a current program?

Has this program been requested by the community? If so, please provide supporting information.

Be sure to fill out the enclosed form as completely as possible. It will enable us to evaluate your program and assess its ability to meet the needs of our community.

You may view all our course offerings at

[www.haywardrec.org](http://www.haywardrec.org)

**For general reference, our program dates are as follows:**

<b>Quarter</b>	<b>Proposal Due</b>	<b>Quarter Dates</b>	
Winter	3 <sup>rd</sup> week in August	Jan-Mid March	
Spring	3 <sup>rd</sup> week in October	Mid March-Mid June	
Summer	3 <sup>rd</sup> week in January	Mid June-August	
Fall	3 <sup>rd</sup> week in April	September-Mid Dec	

If you have any questions please call (510) 888-0117 or e-mail me at [claj@haywardrec.org](mailto:claj@haywardrec.org)

Jean Clark  
Recreation Supervisor



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## New Class Proposal

Name \_\_\_\_\_

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

Phone Number: Home (\_\_\_\_\_) \_\_\_\_\_ Work/Cell (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ email \_\_\_\_\_

Website \_\_\_\_\_

### Program Information

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

Goals / Objectives of the class: \_\_\_\_\_  
\_\_\_\_\_

Class Description (used to develop write up for District brochure): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age group \_\_\_\_\_ # of weeks \_\_\_\_\_ Times \_\_\_\_\_ am/pm

Day(s) of the week \_\_\_\_\_ Hours per session: \_\_\_\_\_

Participant Min. # \_\_\_\_\_ Max. # \_\_\_\_\_

The District reserves the right to set class fees. Do you have a recommendation? \_\_\_\_\_

How much prep time is needed at each class meeting for set up? \_\_\_\_\_  
Clean up? \_\_\_\_\_

What skill levels does this program cover (beg - adv)? \_\_\_\_\_

Does this program require pre-requisites? \_\_\_\_\_ If so, explain \_\_\_\_\_  
\_\_\_\_\_

## Participant Information

Will outside materials need to be purchased by the participant? \_\_\_\_\_

If so, please list cost and where items may be purchased? \_\_\_\_\_

\_\_\_\_\_

Will materials be needed for the 1st class meeting? \_\_\_\_\_

Are there any special clothing requirements for the class? \_\_\_\_\_

Please describe: \_\_\_\_\_

\_\_\_\_\_

Does the participant need a partner for the program (including dance, parent/me classes)? \_\_\_\_\_

Describe to what extent parent participation will be allowed or is needed? \_\_\_\_\_

\_\_\_\_\_

Is there any special information participants should receive about the program when registering?

\_\_\_\_\_

## District Support

Facilities needed (This refers to type & size of room, special floor, access to sink/water etc.):

\_\_\_\_\_

\_\_\_\_\_

(Please attach a diagram of room set up)

What basic supplies will you need from the District? (Tables, chairs, mats, P.A. system, stereo etc?)

\_\_\_\_\_

What type of publicity, outside of the District brochure, do you plan on using? \_\_\_\_\_

\_\_\_\_\_

## Instructor Information

Please list the approximate dollar amount you wish to make per hour? \_\_\_\_\_

Have you ever taught or are currently teaching classes on a percentage basis? \_\_\_\_\_

If so, please list locations **and** percentages \_\_\_\_\_

\_\_\_\_\_

If the District will require liability insurance for your program, are you prepared and/or willing to provide your own liability insurance? \_\_\_\_\_

Do you currently have a list of potential participants that are interested in this program? \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Attachments

Please attach the following items to this proposal:

- X **Current resume** - including any past experience, paid or unpaid, that qualifies you to teach this program. Please include personal and professional references.
  
- X **Program Outline** - what will the program cover and how will it obtain its goals.
  
- X **Program Site Diagram** - please sketch a basic layout your program will require including table/chair placement or any other amenities.
  
- X **Promotional Items** - any program related materials you have including flyers, brochures, press releases, etc.

You may return your proposal via fax, email or mail to:

Jean Clark, Recreation Supervisor  
Hayward Area Recreation & Park District  
1099 "E" Street  
Hayward, CA 94541

Phone: (510) 888-0117

Fax: (510) 886-7733

Email: [claj@haywardrec.org](mailto:claj@haywardrec.org)

**Feel free to contact me if you have any questions.**