



City of Diamond Bar Recreation Services
 1600 Grand Avenue, Diamond Bar, CA 91765
 Mailing Address: 21810 Copley Drive, Diamond Bar, CA 91765
 909.839.7072 909.839.7070 Fax: 909.612.4580

CLASS PROPOSAL

FALL 2019: SEPTEMBER 3 - DECEMBER 13

Proposals must be completely filled out in order to be considered for the Winter 2019 season. Proposals are due by **Wednesday, May 1, 2019 at 4 p.m.** to the Diamond Bar Center or via email to MWeeks@DiamondBarCA.gov. If it is a new class, proposals need to include a weekly syllabus. **Late proposals will NOT be accepted.**

Class Title: _____ **Number of Weeks:** _____

Class Description: _____

Desired Class Location: _____

Dates classes not held because of holiday or vacation: *Holidays/Facility Closures –November 12 & 28-29
 Please list any additional personal dates _____

Class Fee: \$ _____ + **\$10 Administrative fee** = \$ _____ (The City will add a \$10 administrative fee. An additional \$5 non-resident fee will be added in for non residents. You will be compensated for 60% of the original class fee. i.e. If you charge \$10 for a class, the City adds \$10 making the total class fee \$20 or \$25 for non-residents. You will be paid 60% of the \$10, or \$6.)

Material Fee (detailed description on reverse side): \$ _____

Class Minimum: _____ **Class Maximum:** _____ (All classes held at the Diamond Bar Center require a 3 person minimum)

Special equipment needed by Instructor: _____

Students Should Supply: _____

Session	Desired Start Date	Desired End Date*	Day of Week	Start and End Time	Age Group
1					
2					
3					
4					

Instructor Name: _____

Address: _____

Phone: _____ **Cell:** _____ **FAX:** _____

Which phone number/email may we release to the public? _____

Email: _____ **Website:** _____

Assistant Name: _____ **Phone:** _____

Please note: All sub-contractors and volunteers working must be fingerprinted

CONTINUE ON REVERSE SIDE

Material Fee: \$ _____

If your class has a material fee, please provide an itemized list below.

Item with brief description	Cost per unit

FEES:	
Class fee per person:	\$ _____
*Administrative Fee:	\$ +10.00
Total:	\$ _____

If you would like to offer additional classes, please attach and submit additional Proposals to this form.

PROPOSAL DISCLAIMER

- ◆ **Completing this form is NOT a confirmation that your class has been approved.**
Submittal of a proposal is not a guarantee your class will be accepted. Classes chosen to run are determined based on a variety of factors including: instructor credentials, community need, facility availability, and cost.
- ◆ Please note that classes will not be held on any City observed holidays without staff approval.
- ◆ No additional classes other than what is advertised in the brochure will be permitted.
- ◆ Classes that are cancelled due to low or no enrollment for two consecutive quarters will no longer be offered.
- ◆ **All instructors, assistants and substitutes are required to be fingerprinted.**
- ◆ The City handles all registration for classes. Instructors are not permitted to collect fees with the exception of supply fees. 100% of supply fee goes to the instructor.
- ◆ The City will pay the instructor **60%** of the total enrollment fees collected, minus the \$10.00 City administrative fee.
- ◆ Instructors will be required to attend one orientation meeting per year in order to teach with the City.
- ◆ Independent Contract Instructors will not discriminate against any employee, volunteer, participant or student due to race, religion, creed, color, national origin, gender, sexual orientation, physical or mental handicap, marital status, veteran status or age.

I have read and understand the above policies and understand that completing this form is not a confirmation that my class(es) has been approved. I further understand that I must sign an Agreement for Recreation Services Instruction prior to teaching.

Signature: _____ Date: _____