



Excelsior Springs Parks and Recreation Class Proposal Form

The City of Excelsior Springs Parks and Recreation Department is looking for quality instructors to enhance the variety of classes, workshops and programs offered throughout the year at its facilities.

Please complete this form and return to:
Excelsior Springs Parks and Recreation Department
ATTN: Katie Noyd
112 South Thompson
Excelsior Springs, MO 64024

Contact Information:

Name: _____
Business: Organization (if applicable): _____
Address: _____
Work Phone: _____ Home Phone: _____
Email: _____
Web Site (if applicable): _____

Class Information Proposal:

Course Title: _____
Class Start Date: _____ Class End Date: _____

Days you are interested in teaching this class (you may choose more than one):

___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___ Sunday

Number of day (s) you are interested in teaching this class per week:

_____ One day per week _____ Multiple days per week

Time (s) you were interested in teaching this class _____ a.m. or p.m. to _____ a.m. or p.m.

Detailed Course Description (Please describe class, course objectives, age groups, etc. For additional space, continue on a separate piece of paper):

Class size (# of students) Minimum _____ Maximum _____

Suggested class fee : _____ Additional supplies fee you will collect: _____

Class instructors may be required to provide a resume, certifications and background check

Instructor Signature: _____ Date: _____

For more information, contact Excelsior Springs Parks and Recreation at 816-630-1040.