Do you have a talent or skill that you’d like to share with others? The City of Bristol Parks, Recreation, Youth and Community Services invites you to submit a program proposal for a future class. We recruit instructors to teach a wide variety of classes that provide the community with positive recreational experiences. We offer programs throughout the year in a variety of locations, to a wide range of ages and ability levels as a part of our department’s mission to “enhance the quality of life for all Bristol residents.”

**Program proposals may be mailed to:**

Bristol Parks, Recreation, Youth & Community Services  
2nd Floor City Hall, 111 North Main St.  
Bristol, CT 06010  
Attn: Amry Shelby, Recreation Supervisor

**Program proposals may be e-mailed to:**

[AmryShelby@bristolct.gov](mailto:AmryShelby@bristolct.gov)

Proposal are considered for review based on factors including, but not limited to, community demand, relevance to City objectives, existing courses, and potential for cost recovery. Application does not guarantee acceptance.

**Application Information**

**Name**: Click here to enter text. **Date**: Click here to enter text.

**Address**: Click here to enter text.

**Email**: Click here to enter text. **Website**: Click here to enter text.

**Please list all education, certifications, and experience relevant as it pertains to becoming an instruction for the Parks, Recreation, Youth and Community Services Department:**

Click here to enter text.

**Submission deadlines are as follows:**

*Fall Program Proposals must be submitted no later than August 1st*

*Winter Program Proposals must be submitted no later than November 1st*

*Spring Program Proposals must be submitted no later than January 1st*

*Summer Program Proposals must be submitted no later than March 1st*

**Proposed Class Information**

*Describe proposed class information here. The information you provide may be altered to best serve the community, coincide with facility availability and fit the direction of the department.*

**Proposed Class Title:** Click here to enter text.

**Have you taught this class or a class similar to this before?** Yes  No

**If so, where:** Click here to enter text.

**Creative description of program (*this would appear on advertisements):*** Click here to enter text.

**What are the class benefits for the participants?** Click here to enter text.

**Program Length (*specify number of days and/or weeks)***: Click here to enter text.

**Program Frequency (*specify frequency, i.e., once a week)*:** Click here to enter text.

**Program Time Preference (*specify time of day, i.e. morning, afternoon, etc.)*:** Click here to enter text.

**Program Day Preference (*specify a day(s) of the week)*:** Click here to enter text.

**1st Choice: Days  Su  M  T  W  Th  F  Sa Duration:** Click here to enter text.

**2nd Choice: Days  Su  M  T  W  Th  F  Sa Duration:** Click here to enter text.

**3rd Choice: Days  Su  M  T  W  Th  F  Sa Duration:** Click here to enter text.

**Minimum number of participants per session/class:** Click here to enter text.

**Maximum number of participants per session/class:** Click here to enter text.

**Age requirements:** Click here to enter text. **to** Click here to enter text. **years old.**

**Type of venue (i.e. classroom, athletic field, etc.):** Click here to enter text.

**Desired rate of pay for instructing the class:** Click here to enter text.

**Will you provide your own materials?** Click here to enter text.

**If no, please list materials needed:** Click here to enter text.

**Additional Information (no required, but recommended)**

We encourage potential instructors to consider submitting the following information, if applicable:

* Current Resume
* Brief lesson plan for at least one class session
* Proposed handouts
* Flyers, brochures, or advertisings used for your class
* Photos or samples of class