



Town of Mills River, NC
Parks and Recreation Department
Program Proposal Form

Instructor's Name: _____ Date: _____

Business/Organization: _____

Address (Mailing): _____

Phone: _____ E-mail: _____

Website: _____

Have you ever been convicted of a crime other than a minor traffic violation? Yes No

Do you have reliable transportation? Yes No

Do you have liability insurance? Yes No (selecting no does not necessarily disqualify you)

Do you have workers' compensation insurance? Yes No (selecting no does not necessarily disqualify you)

To whom should checks be made payable: Instructor _____ Business _____ (copy of W-9 form will be required)

Please describe any relevant experience or certifications: _____

Course/Program Title: _____

Detailed Program Description:

Program Objectives:

Learning Outcomes (What will the participant learn/gain from this program):

Please give us a description of your program that could appear in the Town's Advertising (Be Creative):

Program Length (1 day, 4 weeks, etc.): _____

Total Number of Sessions: _____

Sessions will be Held (weekly, monthly, etc.): _____

Preferred Day(s) of Week: _____

Preferred Time(s): _____

Proposed fees to be paid to the instructor:

Per person, per session: \$ _____

Are there any material costs per person, per session? _____

Maximum Number of Students: _____ Minimum Number of Students: _____

Type of Facility/Space Needed: _____

Type of Room Set Up Needed (Tables, chairs, etc?): _____

Please list three references, with contact information, who can speak specifically to your ability to conduct your program (not family members):

1. Name: _____ Telephone: _____ E-mail: _____

2. Name: _____ Telephone: _____ E-mail: _____

3. Name: _____ Telephone: _____ E-mail: _____

Please attach your resume if it pertains to your professional ability.

YOU ACKNOWLEDGE THAT YOU WILL BE PROVIDING INSTRUCTION AS AN INDEPENDENT CONTRACTOR OF THE TOWN OF MILLS RIVER AND WILL NOT BE AN EMPLOYEE OF THE TOWN FOR ANY PURPOSE. YOU WILL BE SOLELY RESPONSIBLE FOR THE ACTIVITIES YOU SUPERVISE OR INSTRUCT AND AGREE TO SAVE AND HOLD THE TOWN OF MILLS RIVER HARMLESS FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, INJURY AND DAMAGES OF ANY SORT ARISING OUT OF THE INSTRUCTION YOU WILL PROVIDE.

This the _____ day of _____, 202____.
