**CITY OF CHEHALIS**

**PARKS & RECREATION**



**Instructor Interest Form**

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Phone #: Click or tap here to enter text.

Name of Activity/Class/Camp: Click or tap here to enter text.

Please describe your activity, including type of space and equipment needed: (this will be used for the activity guide)

Click or tap here to enter text.

What is the intended **age range**? Click or tap here to enter text.

What are the proposed **dates**?Click or tap here to enter text.

Number of **weeks**? Click or tap here to enter text.

What **days** of the week are you interested in teaching? Click or tap here to enter text.

What **time** are you interested in teaching class? Click or tap here to enter text.

What would the anticipated **cost per person** be? Click or tap here to enter text.

What is the **min/max number of participants** for the class? Click or tap here to enter text.

**Once completed, please email this form to Recreation@ci.chehalis.wa.us**