

Application to Offer a Class Hosted by the Albany Community Center

CONTACT INFORMATION

Name: _____ Birthdate: _____

Current Grade Level (if attending high school or college): _____

Home Address: _____

City/State/Zip Code: _____

E-Mail Address: _____

Primary Phone #: _____

Secondary Phone #: _____

COURSE INFORMATION

Name of Course: _____

Type of Course: (please check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Educational | <input type="checkbox"/> Health & Fitness | <input type="checkbox"/> Home & Garden |
| <input type="checkbox"/> Arts Education* | <input type="checkbox"/> Self Defense | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Sports Camp | | |

*dance, drawing & painting, photography, etc.

Eligible Participants: (please check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Elementary Students (4K – 4) | <input type="checkbox"/> Middle School Students (5 – 8) |
| <input type="checkbox"/> High School Students (9 – 12) | <input type="checkbox"/> College/University Students |
| <input type="checkbox"/> Adults | <input type="checkbox"/> Seniors (55+) |
| <input type="checkbox"/> Other (please specify): | |

Facility Needs: (please check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> CC Multi-purpose Room | <input type="checkbox"/> Albany Schools (please specify): |
| <input type="checkbox"/> CC Weight & Cardio Room | |
| <input type="checkbox"/> CC Yoga/Exercise Room | |
| <input type="checkbox"/> CC Family/Game Area | <input type="checkbox"/> Outdoor Area (please specify): |

Length of Course: _____

Preferred Begin Date: _____

Number of Days per Week & Preferred Days of the Week:

Cost of the Course: _____

The course teacher/trainer receives 70% (80% if they are a high school/college student) of the course fees and the Albany Community Center retains 30% of the fees for facility usage and administrative support.

For Educational, Arts Education, Sports Camps or courses targeted for school age children (4K through 12), please submit the additional following documentation:

- Course Objective(s)
- Class by Class Outline
- Course Material/Supply Needs
- Contact information of Albany School District Faculty/Staff member or Adult sponsor if you are still enrolled in high school

If you have any questions regarding the application process or completing the form, please contact:

Suzi Gould
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608-443-8509