

Elizabeth Park & Recreation District

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Program Proposal

Name of Program: _____ Target Population(s): _____

Proposed Program Participant Fee(s): \$ _____ Projected # of Participants: _____

of Times Program Meets (total sessions): _____ Length of Each Session: _____

Desired Season(s) to Offer Program: _____

Park Space(s) / Facilities Required for Program: _____

Equipment / Supplies Needed for Program and Source: _____

Any other Requests / Needs from Park District: _____

Qualifications of Program Leader / Instructor: _____

Program Description (to be used for promotional purposes): _____

Name of Program Contact: _____ Phone: _____

Email: _____ Today's Date: _____