

Whitefish Bay Recreation Department  
5205 North Lydell Avenue  
(414) 963-3947

Program Proposal Form

Proposed program title: \_\_\_\_\_

Dates: \_\_\_\_\_ Hours: \_\_\_\_\_  
From To

Enrollment limit \_\_\_\_\_ Age/grades of participants \_\_\_\_\_

Proposed program supply cost: \_\_\_\_\_

Facility/Green space needs and set-up: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Instructor/s name: \_\_\_\_\_

Proposed rate of instructor/s pay: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email: \_\_\_\_\_