



**SOUTH WINDSOR  
Parks & Recreation**

Dear Potential Contractor,

Thank you for your interest in becoming a contractor for the South Windsor Parks & Recreation Department! Please complete the attached Program Proposal Form and submit it to the Parks & Recreation Department office, located at 350 Foster St. Decisions on proposals will be based on: *facility availability, strength and uniqueness of the proposal, compatibility with our current programming, and timing with the release of our promotional magazine* – “Parks & Recreation Magazine”. We release two issues annually - one early March for our Spring/Summer offerings and a second release around early August for activities in the Fall/Winter seasons. To be included in the magazine we must receive proposals for consideration at least two months prior to the targeted distribution dates.

The staff will review your proposal and contact you to discuss it further. Please allow 2-3 weeks for a staff member to get back to you. Please be as detailed as possible, as it will help our staff to better see your vision for the class. Submission of this form does not guarantee the program will run.

We look forward to receiving your submission and hope to work with you to expand our program offerings to our residents.

Thank you,

*Molly Keays*, Director  
South Windsor Parks & Recreation Department



## South Windsor Parks & Recreation Department

### New Program Proposal Form

Phone: (860) 648-6355 Fax: (860) 648-5048

Email: [rec@southwindsor-ct.gov](mailto:rec@southwindsor-ct.gov)

Name of Company: \_\_\_\_\_

Name of Contact/ Program Instructor: \_\_\_\_\_

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

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

Name of Proposed Class/es:

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Brief description of proposed class:

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What is or are the benefit(s) to the participants?

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What are your preferred days and times to run this class?

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How long would each class run (length of class, number of weeks)?

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What rate of pay are you looking for? Per person? Per class?

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What would be your minimum and maximum number of participants?

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Does this class require a particular type room or any special equipment or flooring? If yes, please specify.

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Do you have a back-up substitute to cover your class in the event that you cannot make a class?  
If yes, who? (Please include contact information).

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What would be your minimum/maximum age requirement?

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Are you or your business insured? Yes ☐ No ☐ Insurance Company? \_\_\_\_\_

What is your preferred refund policy?

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How will you handle make-up classes?

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Have you, or any of your associates ever been convicted of a felony? If yes, explain?  
(If hired, you will be subject to a background check.)

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What are your, your associates and /or your substitute's credentials/certifications that  
appropriately qualify you to deliver this program? Please attach documentation.

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Please list any references and phone numbers.

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*\*All classes are subject to South Windsor Recreation Department Approval.\**