



CLASS/ WORKSHOP PROPOSAL

Title of Class/ Workshop _____

Instructor's Name _____

Beginning _____ Intermediate _____ Advanced _____ Ages (if Kids) _____

Dates _____ Time _____

Number of Weeks _____ Minimum # Students _____ Maximum # Students _____

Tuition _____ Supply Fee (non-BRMAA supplied items) _____

BRMAA Supply Fee (items provided by BRMAA) _____ Total _____

Supply List Yes _____ No _____ If yes, please list or attach separate sheet. _____

Description of the class content and objectives _____

List intended projects _____

Techniques students will learn _____



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Instructor's Name _____

Address _____

Home Phone _____ Cell Phone _____

E-mail _____

Please e-mail the following to BlueRidgeArts.Programming@gmail.com.

- A short bio of yourself
- Photo/s of yourself
- Photo/s of what the students would be learning
- Anything else that would help us promote your class

Please note our commission rate scale is based on a minimum student number of (6) or more per class (adjusted percentages are based on net of total receipts, including applicable member discounts)*:

1 – 3 students signed up – instructors receive 100% of the class fee

4 – 5 students signed up – instructors receive 80% / Art Center receives 20%

6+ students signed up – instructors receive 70% / Art Center receives 30%

*Any classes with less than a (6) student maximum will receive the standard 70%/ 30% commission rate scale.

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For Office Use Only

Date registered	
Classroom	
Instructor Agreement	
Authorized by	

Class catalog	
Google calendar	
Facebook	
Pinterest	

E-Blast schedule	
QuickBooks	
Maximizer	
Supplies in stock	

Notes _____
