



# CITY OF LAGUNA NIGUEL

## Parks and Recreation

### Contract Instructor Application

Thank you for your interest in offering a class within the Laguna Niguel Parks and Recreation Department. There are no guarantees that your submittal will be accepted by the LNPRD. All proposals will be reviewed in accordance with the community center's current schedule and community needs.

#### APPLICANT INFORMATION

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

WEBSITE or  
SOCIAL MEDIA  
PAGES: \_\_\_\_\_

#### CLASS PROPOSAL INFORMATION

CLASS TITLE(S): \_\_\_\_\_

CLASS  
DESCRIPTION: \_\_\_\_\_

AGE RANGE: \_\_\_\_\_ MIN. ENROLLMENT: \_\_\_\_\_ MAX. ENROLLMENT: \_\_\_\_\_

CLASS FEE: \_\_\_\_\_ MATERIAL FEE (IF APPLICABLE): \_\_\_\_\_ LIST MATERIALS: \_\_\_\_\_

PREFERRED SEASON: WINTER SPRING DAYS OF WEEK:  
SUMMER FALL

CLASS LOCATION:  CLASS TIME(S): \_\_\_\_\_

CLASS DATES: \_\_\_\_\_ PROMOTIONAL EFFORTS THAT WILL BE TAKEN: \_\_\_\_\_

---

*Please attach any pertinent information or certification to this proposal such as your resume, class outline, licenses, training, syllabus and other supplemental material and experience that may assist us in reviewing your class proposal.*

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Return form to the Parks and Recreation Registration Office at Crown Valley Park with attention to Derek Dillahunty, Recreation Coordinator or email [DDillahunty@CityofLagunaNiguel.org](mailto:DDillahunty@CityofLagunaNiguel.org).**