



# Class Proposal

Please print or type:

1. **Class title:**

2. **Class Description:** Include a brief description of your class. (If it is too long, we reserve the right to shorten your description.)

3. **Credentials:** Include a brief (1 or 2 sentence) bio of your credentials and expertise.

4. **Class Objective(s):**

Name: \_\_\_\_\_

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

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

Website: \_\_\_\_\_

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

If this is a cooking class, will you need assistance with the cost of groceries? (we can offer a maximum of \$40)  yes, amount needed \_\_\_\_\_  no

**Requested date and time:** \_\_\_\_\_

Classes will take place on Wednesday evenings as early as 6 pm. All classes must end by 9:30.

**List any supplies that students should bring:**

**Fee for students** (owners will pay \$2 less, make sure this fee will cover your materials cost but still be affordable to encourage attendance): \$\_\_\_\_\_

**Will you use the DVD player or projector?** \_\_\_\_\_

If you are using the DVD player or projector, please set up a time prior to your meeting for instructions on how to use the equipment. (amyh@goodfoods.coop)

**Maximum number of students** (The Community Room's capacity is 28): \_\_\_\_\_

**Completed W-9 form must be returned before payment can be made.**

*I have read and understand all the Class Guidelines for using the Community Room at Good Foods Co-op.*

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**Signature**

**Date**

**Questions?** Please contact Amy Haag at Good Foods 278-1813 x 244 or e-mail amyh@goodfoods.coop

**Good Foods Co-op  
455 Southland Drive  
Lexington, KY 40503  
(859) 278-1813**