

BROOKINGS ARTS COUNCIL Instructor Registration Form
Fill form out completely. Use back if necessary. Deadline for submissions:.

CONTACT INFORMATION

Name: _____ Phone Number: _____

Email Address: _____ Second Contact: _____

Address: _____ City _____ State _____ Zip _____

CLASS INFORMATION

Title of Class: _____

Brief class description: _____

Description for advertising purposes: _____

Preferred dates for class:

1st Choice _____ 2nd Choice _____ 3rd Choice _____

Time: _____ Number of Sections: _____ Number of Sessions: _____

Age Limit: _____ If yes, list **age** Min/Max number of **students per session**: _____

EQUIPMENT, SPACE & MATERIALS

Will you be providing your own materials? _____

Please list the equipment, materials, or supplies the BAC will be responsible for providing: _____

Do you have any special classroom requirements: _____

If yes, what are they: (i.e.: must have access to a sink) _____

CLASS COST & INSTRUCTOR FEES:

If Artist supplies the materials: 75/25 SPLIT- Artist receives 75%/BAC 25%

60/40 SPLIT-BAC provides materials: Artist receives 60%/ BAC 40%.

Please take that into consideration with requested instructor fee amount.

Instructor Fee: _____ Are all materials included in your Instructor fee: _____

If no, list additional fees: _____

What do these fees cover: _____

Note: To cover BAC operational costs the listed price will be determined by the BAC.

PAYMENT TO INSTRUCTORS WILL OCCUR AFTER THE 3RD WEDNESDAY OF EVERY MONTH. CHECKS ARE CUT AT OUR MONTHLY BOARD MEETING.

SIGNATURE: _____ **DATE:** _____