

OFFICE OF THE COUNCIL ON AGING

266 Beech Street
Belmont, MA 02478
Tel: 617-993-2970

Dana Leavitt Assistant Director
Direct line to Dana: 617-993-2977
E-mail: dleavitt@belmont-ma.gov



PROGRAM PROPOSAL--COUNCIL ON AGING / BEECH STREET CENTER

Name of Instructor _____

Name of Company _____

Instructor's Contact Information: Phone _____ E-mail _____

Address _____

Name of Program _____

Duration (circle one) One Time Series Dates and Times
Available

Please note that when date(s) and time(s) of program are determined the booking is considered a Commitment on the part of both parties. In the spirit of respect for program participants and COA staff please notify of cancellation or delay as far ahead of the event as possible.

Short description of program. This is often the basis of our publicity and the way to market your program Please also describe instructor credentials and any publicity materials, including website. Flip over sheet, if necessary.

Goal of Program _____

Equipment needed from COA? _____
Please note: a digital projector, screen, and Windows 7 laptop (with PowerPoint viewer) is available. Instructions for use are provided on the projector cart.

Circle one: Pro Bono Fee: \$_____ Do you have a Cultural Council grant? Yes No

Are any waivers necessary? No Yes (If yes, please describe: _____)

Please provide names and phone numbers of two references for organizations for which you have Provided similar program(s).

- 1. _____
- 2. _____

Please note: 1. For best attendance, program should be scheduled 45 days in advance.

3. The Center is open until 7 on Tuesdays, so you may schedule a class that ends at 6:45P.M.

4. Merchandise (e.g. CDs) is subject to a 10% donation to the Council on Aging