



Trail's End Art Association & Gallery

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Class/Workshop Proposal Form

Please complete and submit this form to TEAA at PO Box 2351, Gearhart, OR 97138, or Email to trailsendartassociation@gmail.com. Your proposal will be reviewed by the TEAA Board at their next meeting, and you will be promptly notified of their decision. Please fill out all the fields and contact sherisesmithnv@gmail.com if any questions. Thank you for your interest in Trail's End Art Association.

Name: _____ Member of TEAA? Yes ____ No ____

Mailing address: _____

E-mail address: _____ Phone number: _____

Website: _____

Title of proposed class/workshop: _____

Describe the class/workshop in a few words:

What are the preferred days and dates?

Preferred Days (Mon-Sun) _____ Date(s): _____

What are your preferred times per session? (ex. 10am-3pm) _____

Experience level(s) of Students. Beginner ____ Intermediate ____ Advanced ____

How many students will you teach at a one time? Minimum: _____ Maximum: _____

Do you want a cut off for sign-ups of 1 or 2 weeks prior to the class? Yes/No # of weeks ____

What amount do you want to receive per Student? \$ _____

(TEAA will add an additional charge (example: 25% for members and 40% for nonmembers for administrative charge to cover all costs of the workshop)

What material do your students need and/or that you will provide? Materials Cost?

Lodging or other needs?

9. Instructor Biography (use an additional sheet)

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TEAA charge to Students. Member \$ _____ Non-Member \$ _____

Materials Fee Included? Yes ____ No ____ N/A ____ If 'No', fee \$ _____

Lodging Needed? Yes ____ No ____ N/A ____ Other Fees? Yes ____ No ____ N/A ____