



ABINGTON TOWNSHIP PARKS & RECREATION  
Recreation Program Activity Proposal

Please submit this form to [parksinfo@abingtonpa.gov](mailto:parksinfo@abingtonpa.gov).

Recreation Activity Name: \_\_\_\_\_

Program Type:    Pre-school            Youth            Teens            Adults            Senior Adults

**Activity Information:**

Days: M    T    W    TH    F    Sat.    Sun.    Dates: \_\_\_\_\_

Times: \_\_\_\_\_ Facility Location: \_\_\_\_\_

Ages/Grades: \_\_\_\_\_ Min./Max. \_\_\_\_\_

Activity Instructor: \_\_\_\_\_

Activity Description:

**Instructor Information:** *(Individual Responsible for Class)*

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Payment: \$\_\_\_\_\_pp    **OR**    \$\_\_\_\_\_/hr.    **OR**    \_\_\_\_\_%NRI

\_\_\_\_ Co. Insurance cert. on file    \_\_\_\_ Background cert. on file    \_\_\_\_ Instructor contract on file

Make check payable to: \_\_\_\_\_

Mail check to: \_\_\_\_\_

Materials supplied by Instructor:

Materials needed by Participant:

Materials supplied by Abington Township: