

Workshop Proposal

All use of KYWC and its resources must be approved in advance by the Board of Directors. All workshops offered to the public must be approved by the BOD.

Please complete the following information:

Today's date _____ KYWC member: Yes _____ No _____

Your name _____

Organization (if any) _____

Address _____

Phone number _____ Email _____

Proposed Workshop (Include title, a short description, # of hours, audience, cost, materials fee (if any), other important information) Use the back side, if needed.

Your qualifications to facilitate this workshop

Proposed dates & times _____

KYWC Board Review Date _____ Approved: Yes _____ No _____