

**Class Leader/Facilitator
2010-2011 E.D.G.E. Nights Class Proposal**

Would you like to lead or facilitate a class at our Wednesday night program? Here are a few details we need for programming SIX WEEKS prior to the session for which a class is proposed.

When completed, please submit this to the church office for review and scheduling.

Your Name: _____ **Phone:** _____

Email Address: _____

Best way and time to reach you: _____

Your Class Title: _____

Is this an adult class: _____ **Youth (Jr. high):** _____ **Youth (Sr. high):** _____

Children (preschool-K): _____ **Children (grades 1-4):** _____ **Children (grades 5-6):** _____

The United Methodist mission is; to make Disciples of Christ for transformation of the world. Please tell us how your class meets this mission.

Please write a brief description of your class: (a description that provides the reader with what they might learn or do in the class.) We may use this in advertising and on the registration form.

Fees: We have made most of our classes cost free. Occasionally, there have been costs for a workbook etc. Please let us know if any potential costs. Cost per person; \$ _____

Facilities: What needs do you have for your class? Include type of classroom set up, tables and chairs, A/V equipment, etc: _____

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**Classes are mostly in 5 week blocks. What sessions are you available to teach your class?
Please circle *dates* and *times*.**

Fall 2010 and Spring 2011 Sessions and Dates

Fall 2010 Session 1 Sept. 8, 15, 22 , 29, Oct. 6 Times: 6–7 or 7–8 p.m.
(Five weeks)

Fall 2010 Session 2 Oct. 10, 27, Nov. 3, 10, 17 Times: 6–7 or 7–8 p.m.
(Five weeks)

Winter 2010 Session 3 Dec. 1, 8, 14
(Three weeks)

Winter 2011 Session 4 Jan. 12, 19, 26, Feb. 2, 8, 16, 23, Mar. 2 Times: 6–7 or 7–8 p.m.
(This is an extended session and if your class fits better in to an 8-week format this may be the session for you.)

Spring 2011 Session 5 Mar.16, 23, 30 April 6, 13 Times: 6–7 or 7–8 p.m.
(Five weeks)

Spring 2011 Session 6 May 4, 11, 18 Times: 6–7 or 7–8 p.m.
(Three weeks)

For office Use Only:

Date Rcvd _____