



Department of
Parks & Recreation

P.O. Box 228 • Englewood, N.J. 07631 • (201) 568-3472 • Fax (201) 871-6554

Recreation Program Application

Please mail, email or fax this form to

*Englewood Recreation
12 Tenafly Road, Suite 112
Englewood, NJ 07631 Phone: 201-568-3472
 Fax: 201-871-6554
 Email: recreation@cityofenglewood.org

Note: All instructors, coaches, volunteers, etc. will be required to complete and to pass a background check through the City of Englewood's preferred fingerprinting process.

Organization: _____
Name _____ Date _____

Contact: _____
Primary Name _____ Alternate Name _____

Phone: _____
Primary's Cell _____ Alternate's Cell _____

Primary's Secondary _____ Alternate's Secondary _____

Address: _____
Street Address _____ City, State, Zip _____

Email: _____

Prospective Program Title: _____ Target Age/Grade _____

Program Category:
<input type="checkbox"/> Dance/Fitness
<input type="checkbox"/> Music/Art
<input type="checkbox"/> Sports
<input type="checkbox"/> Misc.

Instructor Name _____	Start Date _____	Day _____
Email _____	End Date _____	Room _____
Phone _____	Time _____	Cost _____

Please include a resume and/or reference letter and provide a program description to answer the following:

1. What specific need does your program address? How will your program address that need?
2. What impact do you hope this program will have on those participating?
3. In your perception, what will make your program a success?
4. What will the cost to the participant cover?
5. Who is your target audience? And what are your marketing strategies?