Workshop Application

Instructor’s Name: ________________________________ Phone: ________________________________

Instructor’s Website: _______________________________ e-mail : ________________________________

Name of Workshop: ______________________________________________________________________

Description of workshop (1-2 sentences that we can use/edit for the flyer): ________________________

What is the goal of the workshop?  __________________________________________________________

Skill Level:   Beginner [   ] Intermediate [   ] Advanced [   ] Kids [   ]

Minimum # of Students: __________     Maximum # of Students: __________

Payment Structure: You require Per Student $_________   Will you be using Powerpoint/Internet?_______
(Please remember we will be adding to this amount to assist in covering BAG expenses)

What do Students need to bring? __________________________________________________________

What is included? (Any materials or literature) _________________________________________________

How should students dress?  ________________________________________________________________

Any special requirements, skills needed, or prerequisites? ________________________________________

Pre-registration only or would you take last-minute walk-ins as well? _______________________________

Number of days for the workshop:  1 [   ]  2 [   ]  3 [   ] Other: ________________ Hours per day: ______

Time slot preference:   Weekday [   ] Weekday evenings [   ] Saturday [   ] Specific time requested: ______

When are you looking to have this workshop? We prefer 90 days (3 months) lead time: ________________

We will create the flyer: We will use info from your Bio and your photo plus an image of work to provide
students with an idea of what will be done with a brief description to entice the student to join us.

Additional Comments: ______________________________________________________________________

______________________________________________________________________________________

Please email the following materials along with this completed worksheet to info@BrowardArtGuild.org:
* Your Bio
* Some sample images (examples of what a sample project may look like, preferably square...not mandatory)
* Your headshot
* Any reference web links that would be useful for the students

Broward Art Guild 3280 NE 32nd Street, Fort Lauderdale, FL 33308   Office: 954.537.3370

REV. 09.25.19