

Medford Recreation Program Request Form

Instructor/Owner's Name:	Today's Date:
Company Name (if applicable):	
Address:	City: State:
Phone: Em	nail:
Course Description (Description will be posted in the	Program book, website, and Facebook):
If you need specific dates, please write them down.)	e this section general such as "April Vacation" or "Saturdays". ment:Max Enrollment:
 Space Requirements: Classroom Gymnasium Field Other: 	Equipment Requirements:Tables amount:Chairs: amount:Other:
Additional Information:	