



LIBERTY ROAD RECREATION AND PARKS COUNCIL PROGRAM PROPOSAL

**PLEASE BRING 15 COPIES OF THIS COMPLETED
FORM TO THE EXECUTIVE BOARD MEETING**

Request Date: _____

Program Information

Program Name: _____ Account No.: _____

Program Chairperson: _____ Phone No: _____

Address: _____ City/State: _____ Zip: _____

Registration

Site: _____ Date: _____

Location: _____ Equipment: _____

Program

Site: _____ Date: _____

Days: _____ Times: _____

Projected Income

Anticipated Registration Time(s) & Place(s): _____

Anticipated Registration Income: _____

Total Projected Income: _____

Projected Expenses

Expense Item	Quantity	Item	Price
Expenditure			
<u>Program Assessment (\$100 - \$200)</u>	_____	_____	_____
<u>Participation Assessment (\$5 Youth)</u>	_____	_____	_____
<u>Participation Assessment (\$10Adults)</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Projected Expenses: _____

Budget Summary

Starting Balance (+/-): _____

Total Projected Income: _____

Total Projected Expenses: _____

Projected Year-End Balance: _____

Participation Assessment fees are determined by whether your program has youth or adult participants.

Program Assessment fees are facility fees and are determined by your program participants' ages.

All programs of LRRPC must have a budget approved prior to the start of the program. Budgets must be approved at least one month prior to the start of registration for the program. Budgets are only considered at the Executive Board meetings which are held on the first Wednesday of each month. LRRPC reserves the right to request, at its discretion, a more detail budget format than appears above.

Program Assessment fees are due within (30) thirty days of an approved and signed budget request.

 Program Chairperson Signature Date LRRPC President Signature Date