## Southeast Japanese School and Community Center APPLICATION TO START A NEW CLASS OR ACTIVITY

Name of Applicant			
Address		City	Zip
Phone email ad	dress		
Name of Proposed New Activity Group			
Do you have participants already? If not,	, how do you p	ropose to get participants	?
<del></del>			;
	···		
Participants   Adults   Children	n 🗆 Both	Number of par	ticipants anticipated
How much time does your activity require p	per week?		
Facilities Requested:			
☐ Gym ☐ Multi-purpose Room	☐ Kitchen	☐ Conference Room	☐ Classrooms
☐ Tables (number) ☐ Chairs(r	number)	☐ PA system	☐ Projector/Screen
		:	
Tuition/charges			
Instructor's name			
Instructor's credentials/experience			-
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I, the applicant, request approval to form a	new activity g	coun using the community	center facility. Lam
including documents supporting my class acperformances, etc.	, •	, -	•
Applicant signature:		Date:	
	SEJSCC A	•	
□ Approved □ Denied □	Other	Date:	