



**MOREAN ARTS CENTER**  
ST. PETERSBURG FLORIDA

## New Course or Workshop Proposal

**Instructor Name:** \_\_\_\_\_

**Phone (cell):** \_\_\_\_\_ **(home):** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Course Title:** \_\_\_\_\_

**Course Description:**

---

---

---

---

---

---

---

---

**Teacher Bio:**

---

---

---

---

---

---

---

---

**\*\* Please keep your class description and teacher bio as short and concise as possible.**

**Day of the week:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Session:**

Summer 1 ☐ Summer 2 ☐ Fall 1 ☐ Fall 2 ☐ Winter 1 ☐ Winter 2 ☐ Spring ☐

**Skill Level:**

All Levels ☐ Beginner ☐ Intermediate ☐ Advanced ☐



**MOREAN ARTS CENTER**  
ST. PETERSBURG FLORIDA

**Maximum/Minimum # of students:**\_\_\_\_\_

**Minimum Age of persons allowed in the class:**\_\_\_\_\_

**Classroom Equipment and Needs:**

---

---

---

---

**Materials fee (if any):**\_\_\_\_\_

**Materials list (Please attach a copy)**

**Attach 1-3 photos to use in description that represent the class.**

**Submit completed form for consideration to:**

**Education@MoreanArtsCenter.org**  
**719 Central Ave, Saint Petersburg Florida**

