

**PLEASE PRINT!**

Your Name \_\_\_\_\_ Date Submitted \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Name of CSLP Coordinator that will help with logistics for your workshop \_\_\_\_\_

## WORKSHOP PROPOSAL

1. Workshop Title \_\_\_\_\_
2. Proposed Date(s) \_\_\_\_\_ Proposed Time \_\_\_\_\_
3. Marketing:
  - ✓ Provide a short (50-60 word) description of your workshop for promotion of the workshop in the Sunday bulletin.
  
  - ✓ Provide a fuller, more detailed description of your workshop (up to 100 words) for promotion of the workshop on the CSLP website, Facebook and Meetup page.
4. Proposed fee \$ \_\_\_\_\_  
 NOTE: For those experiencing temporary financial hardship, CSLP can provide a payment plan over the dates of the workshop, or a combination of a minimum fee plus volunteer service. The volunteer service can consist of support to the workshop or volunteer service to the Center. This is handled on a case-by-case basis with the approval of the Education team. The following wording will be included in all marketing: **No one is turned away due to financial reasons. Ask about payment plans and volunteer opportunities.**
5. Anticipated # of participants \_\_\_\_\_
6. Will books/products be sold?  No  Yes Price per unit \$ \_\_\_\_\_ (Selling requires approval by the Education Team.)  
 List of items to be sold and price per unit: \_\_\_\_\_
7. Explain why this Workshop will be attractive to members of our community and meet our vision of "Touching Hearts, Transforming Lives, Creating a World that Works for Everyone".
8. Source of Workshop - check one
  - \_\_\_\_\_ One you designed yourself with original content and material
  - \_\_\_\_\_ Obtained from another Center for Spiritual Living (name) \_\_\_\_\_
  - \_\_\_\_\_ Obtained from another source (name) \_\_\_\_\_
9. Use **page provided** to provide an outline of workshop, brief description of activities, and timeline (including time for room set up and time to reset room). The Workshop Proposal will not be considered without this information.

Submit this workshop proposal to [cslpeninsula@gmail.com](mailto:cslpeninsula@gmail.com). Contact Rev. Abigail at 650-503-4275 with any questions.

Presenter Signature \_\_\_\_\_ Date \_\_\_\_\_

CSL Peninsula Signature \_\_\_\_\_ Date \_\_\_\_\_

**Education team use:**

Workshop date confirmed on CSLP calendar \_\_\_\_\_ Workshop approved by \_\_\_\_\_ Date approved \_\_\_\_\_

Presenter notified of approval \_\_\_\_\_ Date Marketing team notified \_\_\_\_\_ Bulletin dates \_\_\_\_\_

## WORKSHOP AGREEMENT

1. **WORKSHOP MARKETING:** Upon approval of the proposed workshop, the CSLP marketing team will use the short workshop description provided to advertise the workshop in the CSLP Sunday bulletin. The fuller, more detailed description will be used to promote the workshop on the CSLP website, Facebook and Meetup. The presenter agrees to be present at the Center on at least one Sunday in advance of the workshop for promotion, to answer questions and for registration of participants.
2. **WORKSHOP FLYER:** The presenter agrees to use the provided workshop flyer template, or s/he may design, produce and copy their own workshop flyer (8.5 x 11 portrait orientation) for marketing at Sunday services or other locations. The presenter agrees to bring copies of the flyer for the education table. (10 copies are sufficient.)
  - ✓ A Word document template to create the flyer is attached, or provide your own example.
  - ✓ The logo for Center for Spiritual Living Peninsula must appear on the flyer, along with date, time, address, description of the workshop, workshop fee and the following text, "**No one is turned away due to financial reasons. Ask about payment plans and volunteer opportunities.**"
3. **CSL PENINSULA COORDINATOR:** If the presenter is NOT a CSLP member, arrangements must be made for a CSLP Coordinator to provide logistic support for your workshop. The CSLP Coordinator can be asked to help answer questions and register attendees on Sundays prior to the workshop. The CSLP Coordinator will accept and process payments of workshop fees, provide access to the CSLP Center and will assist with completion of workshop close-out paperwork. In exchange for this assistance, the presenter agrees that the CSLP Coordinator will attend the workshop at no charge.
4. **PRESENTER ATTENDANCE ON SUNDAY FOR WORKSHOP PROMOTION:** The presenter agrees to be in attendance on at least one Sunday that the workshop is advertised in the Sunday bulletin, will be available after Service to answer any questions and to register participants. Be sure to bring copies of the workshop flyers for Sunday Service.
5. **TYPES OF PAYMENT ACCEPTED FOR WORKSHOP:** Cash, checks (payable to CSLP) or credit/debit cards will be accepted at the Center by the CSLP Coordinator. PayPal payments will be accepted via the CSLP website. The Education Team strongly recommends that partial or full payment be obtained at the time of registration.
  - ✓ The presenter agrees to make payment arrangements, provide volunteer opportunities or lower the cost for those experiencing temporary financial hardship.
  - ✓ The presenter agrees to provide written receipts for all cash received. A receipt book will be provided by CSLP.
  - ✓ The presenter agrees to properly complete the CSLP Contributions Worksheet, accounting for all payments received by cash, check, credit/debit card and PayPal, and deposit all funds in the safe and lock the door. A list of all payments will be provided to you. The CSLP Coordinator will assist with the completion of the paper work.
  - ✓ The presenter agrees to not remove funds (cash, checks or other) from the Center.
6. **BOOK/CD/PRODUCT SALE APPROVAL:** The presenter agrees to obtain prior approval from the Education Team before selling any products in connection with the workshop. The Education Team encourages the presenter to tithe back to the Center on any profits made on product/book sales.
7. **PROMOTION OF BUSINESSES:** The presenter agrees to not promote or endorse any business. This could compromise CSLP's non-profit status.
8. **WORKSHOP SUPPLIES/MATERIALS:** The presenter agrees to provide all special supplies/materials for the workshop. (E.g. refreshments, copies, special materials or supplies.) CSLP will provide nametags, pens, markers and white board.
9. **MOUNTING ITEMS ON THE WALLS:** The presenter agrees to use only painter's tape for mounting anything on the walls inside the building. Other types of tape can damage the walls and are not acceptable. Per CSLP's agreement with the building management, written consent of the building management office must be obtained before posting any signs outside the office.
10. **SET UP/TAKE DOWN:** The presenter agrees to be responsible for the set up and take-down of tables, chairs and other equipment for the workshop. If additional help is needed, this is a great opportunity to invite someone into service in exchange for a discounted workshop fee. The presenter agrees to:
  - ✓ Leave the room cleaner than it was found.
  - ✓ Return equipment, chairs, or tables to their previous location.
  - ✓ Clean any tables before they are put away. The refreshment area should be clean with all coffee pots washed and coffee grounds disposed of in the compost bin and trash placed in the trash/recycle bins.
11. **PRESENTER PAYMENT TO PRESENTER:** CSLP agrees to pay the presenter 60% of revenue, after approved expenses, and completion of the Workshop Reconciliation form. The presenter agrees to submit the Workshop Reconciliation form within 10 business days after the workshop ends. The presenter agrees that CSLP will not incur a net loss associated with the workshop.

### I ACCEPT AND AGREE TO ABIDE BY THIS WORKSHOP AGREEMENT:

Presenter Signature \_\_\_\_\_ Date \_\_\_\_\_

CSLP Signature \_\_\_\_\_ Date \_\_\_\_\_

## **Outline of workshop**

### **Brief description of activities**

### **Timeline *(including set up time and take down time.)***

# (Name of Workshop)

(Place holder for graphic design or photo of what your workshop is about.)

Date: (Thursday, January 3, 2016)

Time: (6:30—9:30 PM)

Location: Center for Spiritual Living, Peninsula

611 Veterans Blvd, Suite 106, Redwood City, CA 94063

Class Fee: (\$) No one is turned away due to financial reasons. Ask about payment plans and volunteer opportunities

Presenter: ( ) Phone: ( )

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(Place text here that describes the class including benefits to the student. This text should be brief and should entice the reader to want to know more about the class you are offering.)

## WORKSHOP REGISTRATION

TITLE OF WORKSHOP \_\_\_\_\_ PRESENTER \_\_\_\_\_

WORKSHOP DATE(S) \_\_\_\_\_ TIME \_\_\_\_\_ WORKSHOP FEE \$ \_\_\_\_\_

*No one is turned away due to financial reasons. Ask about payment plans and volunteer opportunities.*

	PLEASE PRINT CLEARLY	Amount Paid	Payment Form
Name	_____	\$ _____	<input type="checkbox"/> Cash (give receipt) <input type="checkbox"/> Square Visa/MC <input type="checkbox"/> Check # _____ <input type="checkbox"/> PayPal <input type="checkbox"/> Other Arrangements
Address	_____		
City, State, Zip	_____		
Phone	_____		
Email	_____		
Name	_____	\$ _____	<input type="checkbox"/> Cash (give receipt) <input type="checkbox"/> Square Visa/MC <input type="checkbox"/> Check # _____ <input type="checkbox"/> PayPal <input type="checkbox"/> Other Arrangements
Address	_____		
City, State, Zip	_____		
Phone	_____		
Email	_____		
Name	_____	\$ _____	<input type="checkbox"/> Cash (give receipt) <input type="checkbox"/> Square Visa/MC <input type="checkbox"/> Check # _____ <input type="checkbox"/> PayPal <input type="checkbox"/> Other Arrangements
Address	_____		
City, State, Zip	_____		
Phone	_____		
Email	_____		
Name	_____	\$ _____	<input type="checkbox"/> Cash (give receipt) <input type="checkbox"/> Square Visa/MC <input type="checkbox"/> Check # _____ <input type="checkbox"/> PayPal <input type="checkbox"/> Other Arrangements
Address	_____		
City, State, Zip	_____		
Phone	_____		
Email	_____		