



Please indicate if the following event will be a Recreation 101 or 202 program.

- Rec 101:** *Rec. 101 events must be free for the participant and provide an introduction to the activity*
- Rec 202:** *Rec. 202 provides more advanced instruction and may charge the participants if fee is approved by the state.*

**Recreation 101/ 202: Intro to** \_\_\_\_\_  
(name of course here)

**Instructor name:** \_\_\_\_\_

**Contact phone/email:** \_\_\_\_\_  
(email will only be used for communication regarding the Rec 101 program)

**Organizational Affiliation and web site:**

\_\_\_\_\_  
(if you are representing a club or business, please indicate the name and provide a web site address that can be used in program promotions)

**Event Location(s):**

**Event Date(s):**

**Time:**

(Event locations and dates require approval from the unit supervisor, but we will make every effort to accommodate your preferences)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Cost of event\_ \$\_\_\_\_\_.00 (Fee for 202 events must be approved by a DNR representative)

**Course description:**

(Include information about the program...what participants will experience, what they should bring, length of program last, physical requirements if applicable, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**On-site facility requirements:**

*(List specific requirements needed while on-site during the event, for example, access to electricity or water, open space on land or water, or a need for RSVPs to be managed through park staff)*

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**Cancellation Policy:**

*What are your criteria for cancellation, and at what point would you be making this decision?*

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**Insurance:**

For your protection, we ask that instructors hosting water-based or high-risk programs submit a certificate of liability insurance with a minimum of \$250,000 in aggregate coverage listing the State of Michigan, its several departments, boards, agencies, commissions, officers, and employees as additional insureds. Furthermore, by submitting this document, you and/or the organization you represent agree to hold harmless “the State of Michigan, its departments, officers, employees and agents, from any and all claims and demands, for all loss, injury, death or damage, that any person or entity may have or make, in any manner, arising out of any occurrence related to the activities described within this agreement or the use of state property.

**Other Notes:**

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Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**If you have further questions, please contact:**

Maia Stephens, Recreation Programmer  
[Stephensm3@michigan.gov](mailto:Stephensm3@michigan.gov) (cell) 989-225-8573 (fax) 231-922-5323