



NEW INSTRUCTOR INTEREST PACKET



WELCOME

Thank you for your interest in becoming (or returning as) a City of Rocklin Parks and Recreation instructor. This packet covers everything you need to know about our process, what to expect, and how to get started. Please read through it in full before submitting your proposal.

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MEET YOUR TEAM

These are your primary contacts throughout the instructor onboarding and programming process.

Monica Nitz, Recreation Coordinator

The Recreation Coordinator is your main point of contact for the duration of your programs and manages all marketing and communications. Please direct all initial inquiries here.

monica.nitz@rocklin.ca.us | 916-625-5248

Laurie York, Administrative Analyst

Laurie manages all contracts, insurance, and finance-related items including new vendor paperwork.

laurie.york@rocklin.ca.us | 916-625-5200

Chris Meyer, Parks and Recreation Supervisor

Chris oversees recreation programs, sport agreements, venue rentals, and events.

chris.meyer@rocklin.ca.us | 916-625-5200

SUBMITTING A CLASS PROPOSAL

All class proposals must be submitted through our online form. Please fill out the form in its entirety for your first class. If you are submitting multiple classes, the remaining submissions will only require the required fields.

The proposal link is available online and is open during the Spring for Fall/Winter classes and Fall for Spring/Summer classes.

For each class, please be prepared to provide:

- Program name
- Class description
- Proposed dates and times
- Location
- Cost per participant
- Age range
- Minimum and maximum enrollment

If you have a large number of programs to submit, you are welcome to send the details in an Excel file to the Recreation Coordinator at monica.nitz@rocklin.ca.us in lieu of submitting each individually.

PROGRAM FEES

Full revenue share terms are outlined in the instructor agreement.

SETTING YOUR CLASS FEES

Instructors set their own pricing for classes. Our team may reach out to discuss rates if we feel they fall outside of what the local market typically supports, and we are always open to that conversation.

NON-RESIDENT RATES

The City charges an additional non-resident fee on top of the standard resident rate. For classes priced at \$100 or under, the non-resident rate is \$10 more. For classes priced above \$100, the non-resident fee is 10% of the resident rate. The City retains the non-resident portion in full.

REVENUE SHARE

Rocklin Parks and Recreation operates on a revenue share model with our instructors. The split is as follows, with the instructor's portion listed first:

- Indoor programs: 65% to the instructor / 35% to the City
- Outdoor and field programs: 70% to the instructor / 30% to the City

CANCELLATION POLICY

If a class or program is cancelled by the instructor within 30 days of the program start date, an Administrative Fee will be charged to cover associated costs. The fee is equal to 10% of the total participant fees collected, with a minimum charge of \$100.

MARKETING & PROMOTION

When you partner with us, your programs receive meaningful exposure across multiple channels at no cost to you. That said, promotion is a shared effort. Instructors who actively promote their programs through their own business and personal channels consistently see stronger enrollment. Sharing with your existing audience is one of the most effective tools you have.

HOW WE PROMOTE YOUR PROGRAMS

Your programs are promoted through the following:

- Facebook and Instagram posts and paid advertising
- Monthly e-newsletter reaching over 30,000 subscribers
- Print and digital Recreation Guide distributed seasonally
- Flyers displayed in our Parks and Recreation office
- Outreach and visibility at City events

WHAT WE ASK OF YOU

To help us represent your programs accurately and professionally, please submit the following when you turn in your proposal:

- High-resolution photos of your program or classes
- Copy-ready class descriptions and program details
- Any existing flyers or graphics you have available

Photos and files can be emailed directly to the Recreation Coordinator or shared via a file-sharing link such as Google Drive or Dropbox.

EVENT PARTICIPATION OPPORTUNITIES

As a contracted instructor, you may have the opportunity to perform, demonstrate, or host a booth at some of our largest community events. This is a great way to introduce yourself to thousands of Rocklin residents and grow your program following.

Our signature events include:

- Evenings in the Park (throughout the year)
- Rocklin Civic Celebration (Spring)
- Maker Faire Rocklin at Sierra College (Fall)

These are high-attendance events with strong community engagement. Participation fees are typically waived for contracted instructors. If you are interested in being included, reach out to the Recreation Coordinator and we will do our best to find a spot for you.

PROCESS AND TIMELINE

Here is a general overview of what to expect from the time you submit your proposal through the launch of your programs.

SEASONAL SUBMISSION DEADLINES

Fall and Winter programs (September through February): Submit by May 1

Spring and Summer programs: Submissions are requested in September with a November deadline

WHAT HAPPENS AFTER YOU SUBMIT

Once your proposal is received, here is the typical flow:

- **Step 1: Proposal Review**
 - The Recreation Coordinator reviews submitted proposals and enters approved programs into our registration system. If anything is missing, unclear, or in conflict, they will follow up with you directly.

- **Step 2: Confirmation**
 - Once your classes are entered, you will receive a full list to review. Please confirm that all details were entered correctly and flag anything that needs to be adjusted.

- **Step 3: Contracts, Insurance, and Finance**
 - Our Finance team will reach out to walk through your instructor agreement, collect insurance documentation, and complete any necessary new vendor paperwork. This step typically occurs between June and July for Fall and Winter programs, and December and January for Spring and Summer programs.

- **Step 4: Classes Go Live**
 - Once contracts are signed and all required documentation is received, your classes will go live in our registration system. This typically aligns with the launch of the seasonal Recreation Guide in early August for Fall and Winter programs, and late January for Spring and Summer programs.

INSURANCE REQUIREMENTS

All instructors are required to carry current insurance for the duration of their contract. Requirements vary based on program type and location. Please review the full insurance requirements document included with this packet.

COMMERCIAL GENERAL LIABILITY (CGL)

Indoor activities and sports: Minimum \$1,000,000 per occurrence

Outdoor and field programs: Minimum \$2,000,000 per occurrence

If a general aggregate limit applies, it must either apply separately to this location or be at least double the required occurrence limit.

SEXUAL ABUSE OR MOLESTATION (SAM) LIABILITY

Required if your program involves contact with minors and your CGL policy does not include affirmative coverage for sexual abuse or molestation. Minimum limit of \$1,000,000 per occurrence or claim.

WORKERS' COMPENSATION

Required if you have employees. If you are the sole instructor with no employees, you will need to complete the Declaration of Exemption from Workers' Compensation form. If you hire an employee at any point during your contract, you must notify the City immediately.

ADDITIONAL INSURED REQUIREMENT

All policies must name the City of Rocklin as an additional insured. Please use the following exact language:

The City of Rocklin, its officers, employees, agents and volunteers.

All certificates and endorsements must be received and approved by the City at least five days before you begin any activities.

For full insurance language, provisions, and sample forms, please refer to the attached documents.

REQUIRED DOCUMENTS

The following must be submitted before your classes can go live. Laurie York from our Finance team will reach out to guide you through this process.

- Certificate of Insurance (Acord 25) with current dates and correct policy limits
- Additional Insured Endorsement naming the City of Rocklin
- Workers' Compensation insurance or Declaration of Exemption form
- New Vendor Information Form
- W-9 (required alongside the New Vendor Form)

Sample forms and documents are included as attachments to this packet for your reference.

Completed documents can be emailed to Laurie York at laurie.york@rocklin.ca.us.

CONTACT

We are glad you are here and look forward to building something great together for the Rocklin community. Please do not hesitate to reach out at any time with questions!

Recreation Coordinator, City of Rocklin Parks and Recreation
monica.nitz@rocklin.ca.us | 916-625-5248

EXAMPLE OF CERTIFICATE OF LIABILITY INSURANCE REQUIREMENTS

ACORD **CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

Business' Insurance Broker → **PRODUCER:** Agency Manager, Inc.
2500 Bond Street
University Park, IL 60466
PPhone: 800-999-5368

Name of Insured → **INSURED:** Valet Business
5460 5th Street
Rocklin, CA 95677

CONTACT NAME: Joe Smith
PHONE (A/C, H/O, Ext): 281-330-8004 **FAX (A/C, H/O):**
E-MAIL ADDRESS: Joe@AgencyManager.Com

COVERAGES **CERTIFICATE NUMBER:** PN123465789 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSUR	TYPE OF INSURANCE	ADJ. SUBR	INSO	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR				PN123465789	01/10/2026	01/10/2027	EACH OCCURRENCE ≤ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE ≤ 4,000,000 PRODUCTS - COMP/OP AGG \$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:							
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>							COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/>							EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT ≤ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	Sexual Abuse & Molestation				PN987654321	01/10/2026	01/10/2027	Occurrence \$1,000,000

Claims Made or Modified Occurrence is not acceptable →

Only if you have employees →

If you are working with minors →

Current dates are required →

\$1 Million for indoor classes →

At least double the occurrence above →

This section should reference the class and its location →

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: <Event Name>, <Event Date> Certificate Holder is an Additional Insured as listed on the attached Form

CERTIFICATE HOLDER: City of Rocklin, Its officers, employees, agents and volunteers
3970 Rocklin Road
Rocklin, CA 95677

CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE:

Please use this exact verbiage →

Signed by broker or insurance company →

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ADDITIONAL INSURED ENDORSEMENT SAMPLE

POLICY NUMBER: *(GL Policy Number must be referenced here)*

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
**ADDITIONAL INSURED - OWNERS, LESSEES OR
CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Additional Insured Person(s) Or Organization(s)
<i>The City of Rocklin, its officers, employees, agents and volunteers.</i>

Information required to complete this schedule, if not shown above, will be shown in the Declarations.

- A. Section II - **Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability out of ongoing operations performed for that insured.
 - (1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations as been completed;
 - or
 - (2) That portion of "your work", out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- B. With respect to the insurance afforded these additional insureds, the following exclusion is added:
 - 2. Exclusions
 - This insurance does not apply to "bodily injury" or "property damage" occurring after:



Declaration of Exemption from Workers' Compensation Requirement

Business Legal Name: _____

Contact Person (Name and Telephone): _____

City of Rocklin Contract Name: _____

I am the authorized representative of the Business mentioned above (Business). I warrant that the Business has no employees other than the owners, officers, directors, partners, or other principals who have elected to be exempt from workers' compensation coverage under California law. I further warrant that I understand the requirements of Section 3700 et seq. of the California Labor Code concerning providing workers' compensation coverage for any employees of the Business.

I am not required under any other provision of California law to obtain Workers' Compensation Insurance, including provisions that require businesses without employees to obtain Workers' Compensation Insurance. For example, California Business & Professions Code Section 7125 requires contractors with the following CA State Contractor's License Board License type to obtain Workers' Compensation insurance, even if they do not have employees: C-8, C-20, C-22, C-39, D-49 a subcategory of C-61. This is not an inclusive list, and other laws may require a contractor to obtain Workers' Compensation Insurance even if they do not have employees. I agree to comply with the code requirements and all other applicable laws and regulations regarding workers' compensation, payroll taxes, FICA and tax withholding, and similar employment issues. The Business agrees to indemnify, defend, and hold City of Rocklin harmless from any loss or liability, which may arise from the Business's failure to comply with any such laws or regulations.

Should the Business or its subcontractor hire employees to perform work for the document(s) referenced above, the Business or its subcontractor shall obtain workers' compensation insurance immediately or as otherwise required by law and provide proof of the coverage to City of Rocklin within three (3) business days of the hire.

The Business will defend, indemnify and hold harmless the City of Rocklin from all claims and liability, including workers' compensation claims and any liability that may be asserted or established by any party in the event the Business hires an employee in violation of this addendum. The Business will further indemnify City of Rocklin for all damages City of Rocklin thereby suffers.

This form Declaration of Exemption from Workers' Compensation Requirement shall be attached to and made a part of the Agreement for Services referenced above.

Certification: I certify under penalty of perjury under the laws of the State of California that the information provided on this exemption statement is true and accurate.

Signed: _____ Date: _____

Print Name: _____

Title: _____

Receipt Acknowledge by City of Rocklin: _____ Date: _____

Director of Administrative Services or Designee: _____

CITY OF ROCKLIN NEW VENDOR INFORMATION FORM

Business Name _____ Owner's Name _____ (if a Sole Proprietor) _____ Business Location _____ _____ Remit Address _____ _____ _____ Phone _____ Fax _____ Contact Person _____ Phone _____ Fax _____ Email _____ Tax ID or Owner's _____ *Social Security # _____ _____	<p style="text-align: center;">Internal Information CITY DEPT.</p> <p>Requested By: _____</p> <hr/> <p>Submit completed forms to: VendorAPIInformation@rocklin.ca.us</p> <hr/> <p style="text-align: center;">FINANCE ONLY</p> <p>Vendor # _____</p> <p>Date Entered: _____</p> <hr/> <p>Notes: _____</p>
<p>Type of Business: <input checked="" type="radio"/> Sole Proprietor <input type="radio"/> Partnership <input type="radio"/> Corporation <input checked="" type="radio"/> Government Entity <input type="radio"/> Non-Profit <input type="radio"/> LLC <input type="radio"/> Other</p> <p>Does your business perform a service? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Does your business supply products or materials? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If located in the City of Rocklin, do you have a City Business License? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Briefly describe the products, materials, or services your business provides. s o Example: Building materials, safety equipment, legal services, etc.)N _____ _____ _____ _____</p>	
<p>Payment Terms: Days to Net _____ Other _____ (City standard Due Upon Receipt _____ Days to Discount _____ term is net 30)</p>	

The City of Rocklin is NOT Sales Tax Exempt
A completed W-9 Form is required to be submitted with the New Vendor Form

