

YOUTH ENTREPRENEURSHIP & INNOVATION CLUB

APPLICATION FORM

NAME:

DATE OF BIRTH: SEX:

ADDRESS:

HOME PHONE: MOBILE:

EMAIL:

How did you learn about us?

Friends/Family School/College Social Media

Radio/TV Other (please specify)

What program are you pursuing at the SVGCC?

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Do you have a business idea or a business? If yes, please describe.

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Why do you want to be a member of this Club?

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