



Southwest Florida Enterprise Center

Entrepreneur School Registration

Name: _____
Address: _____ City _____ Zip _____
Telephone: _____
E-mail: _____

current employer: _____ position: _____

What type of business would you like to start?

When? _____

Where? _____

I have my own business already

What type? _____

Where? _____

I am registering for Entrepreneur School because: _____

signed: _____

date: _____

Tuition is \$53.00 (\$50.00 + \$3.00 tax) for first person & \$26.50 (\$25.00 + \$1.50 tax) for each additional person

tuition received by: _____

Paid: cash check# _____ credit card