



The student presenting you with this form is requesting a donation that will help fund their participation in Washington Business Week, a week-long summer program where students experience an in-depth look at business, ethics, free enterprise, teamwork, and life skills that will better prepare them for life after high school.

She/He will be part of a small group competing in a variety of business competitions that are designed to provide real-world experience. The students run a simulated company, making important management decisions, while learning how to succeed in the workforce. They also work closely with business professionals that have volunteered to mentor them during the week.

In order to afford such a tremendous program, this student needs your help! All students are asked to pay a program tuition of \$884.95. (The total cost per student is actually about \$1,600, but fundraising efforts by Washington Business Week cover \$740.) The \$884.95 includes all meals for the week, housing in a college dorm and all program materials. Any amount you can contribute, up to the \$884.95, will help this student to attend the program.

Thank you for your help.

Respectfully,

Herman Calzadillas
Herman Calzadillas
Executive Director



Thank you for your support!

Please visit wbw.org for additional program information.

Business Week, Healthcare Week, Tech-Week, and Advanced Business Week are programs of the Foundation for Private Enterprise Education, a 501(c)(3) organization.

Washington Business Week

P.O. Box 1170 | Renton, WA | 98057

Phone: 253.815.6900 Fax: 253.815.6985 Email: info@wbw.org

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Washington Business Week Summer Programs
STUDENT REGISTRATION SPONSOR FORM

With your support a high school student can experience
the opportunity of a lifetime.

STUDENT INFORMATION

Student Name: _____

Phone Number: (_____) _____

High School: _____

SPONSOR INFORMATION

Name: _____

Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____

Email Address: _____

SPONSORSHIP AMOUNT:

\$ _____

My contribution is enclosed.

(Make checks payable to: **Washington Business Week**)

Please charge my credit card for my contribu-
tion:

Visa M/C Discover AMEX

Account #: _____

CVV#: _____ Expiration: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Please provide me with a contribution receipt.

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