



CLASS XXIX APPLICATION FOR ENROLLMENT

Date of Application _____

Full Name _____

Company _____ Title _____

Position/Responsibilities _____

Company Address _____

City/St/Zip _____ Phone _____

E-Mail _____ Fax _____

Home Address _____

City/State/Zip _____ Phone _____

E-Mail _____ Cell _____

Birthday (mm/dd) _____ ☐ Male ☐ Female

Contact preference ☐ Home ☐ Work

Do you have full support of your employer for the time required to participate in this program?
☐ YES ☐ NO

The tuition for the program is \$1,000 for Chamber members (or individuals sponsored by Chamber members), and \$1,200 for non-members. Is your employer paying the tuition?
☐ YES ☐ NO

What specific leadership competencies do you hope to enhance through your participation in Leadership Metrocrest?

ALL APPLICATIONS DUE BY JULY 30, 2017. PLEASE INCLUDE RESUMÉ & BIO.

It is my understanding the Leadership Metrocrest program is to be a learning experience and requires attendance at the monthly meetings. I also understand that I will be automatically dropped from the program if I miss more than 16 hours from the remaining class.

Name

Date

Return to: Metrocrest Chamber of Commerce 2550 Midway Road #240 Carrollton, TX 75006

Email erin@metrocrestchamber.com