

Enterprising Women Foundation
Student & Guardian Information Form

Student's name:

Student's address:

Street

City

State

Zip or Postal Code

Email address:

Name of Guardian who will accompany you to conference:

Email address for guardian:

Cell phone for student or guardian:

Name of student's school:

City/State or Province of School:

Grade level of student in school:

Career plan/goal or top subject area of study (if known):

Please return this form with your signed permission for to Carley
Dancer at carley@enterprisingwomen.com.