

WWB Application for Venture School Sponsorship

APPLICATION

CONTACT INFORMATION:

WINN-WORTH BETCO

MELISSA MICHAELIS

641-592-0800

DIRECTOR@WINN-WORTHBETCO.COM



I certify that everything I have stated in this application is correct.

The Winn-Worth Betco Executive Director is authorized to make all inquiries necessary to verify the accuracy of the information contained herein.

Applicant(s) will promptly notify Winn-Worth Betco of any subsequent changes that would affect the accuracy of this application.

Winn-Worth Betco is further authorized to discuss this application with the Winn-Worth Betco Executive Board as well as the Winn-Worth Betco Advisory Board.

Sponsorship to Venture School also includes the name of the business to be released in public Press Releases regarding Venture School.

Applicants agree to apply for sponsorship prior to attending Venture School. No reimbursements will be made to Winnebago or Worth County businesses who have gone through the program without filling out this application prior.

Applicants who are awarded sponsorship understand the fee will be reimbursed upon completion of the program. The applicant will need to provide a copy of the certificate to the Executive Director for reimbursement.

Sponsorship award reimbursements will be submitted through Winn-Worth Betco's fiduciary agent which is Winnebago County. By signing below, you are aware your business name will appear in public record as receiving payment along with all other county claims.

By signing below, each representative of the Applicant declares that he/she has read and understands the statement above.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Winn-Worth Betco

Venture School Sponsorship Application

Name of Business: _____

Name of Applicant: _____

Address: _____

City, State, Zip Code: _____

Business contact person: _____

Phone: _____

Alternate Phone: _____

E-mail: _____

Type of business: _____

Sole Proprietorship, Corporation, Partnership, Legal Entity, LLC

Date business established: _____

Reimbursement payable to (include address): _____

Is the **applicant** a United States Citizen or Entity?

Yes/No

Is there any legal action pending against the **applicant**?

Yes/No

Does the **applicant** have any taxes in delinquent status or in dispute?

Yes/No

Are all state and federal income taxes of the **applicant** filed?

Yes/No

Are you related to any of the following:

Yes/No

The current Executive Director of Winn-Worth Betco

Any current Winnebago County Supervisor

Any current Worth County Supervisor

The current Marketing Director/Office Assistant of Winn-Worth Betco?

USE FOR MULTIPLE OWNERSHIP

Name: _____

Phone: _____

Address: _____

Percentage of Ownership: _____

Name: _____

Phone: _____

Address: _____

Percentage of Ownership: _____

Name: _____

Phone: _____

Address: _____

Percentage of Ownership: _____