



CREATING ENTREPRENEURIAL
OPPORTUNITIES

Program Support Commitment

Company/Organization Name: _____

Contact Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Email Address: _____

Web Address: _____

I/We pledge to contribute to the St. Joe CEO Program as follows:

\$ _____ annually for three years, totaling \$ _____.

I/We wish to make an outright gift of \$ _____.

Payment Method

My check for the first payment is enclosed. Please bill me.

My check for the entire payment is enclosed.

Please make checks payable to St. Joe CEO. St. Joe CEO is a 501(c)(3) organization and donations are tax deductible to the extent allowed by law.

Checks should be mailed to:

St. Joe CEO
4100 Edison Lakes Parkway, Suite 260
Mishawaka, IN 46545

Active as well as financial support of the CEO program is critical to its success. I am willing to support the program in the following ways (check all that apply):

Be a CEO class meeting site Speak to a CEO class

Have a CEO class tour my organization Mentor a CEO student

Other, please explain: _____

Mail this form to:
St. Joe CEO
4100 Edison Lakes Parkway, Suite 260
Mishawaka, IN 46545

Or email to: iris@stjoeceo.org
Phone: 574-404-1315
Fax: 574-271-5185
www.stjoeceo.org

Thank you for your support!