



Macoupin County CEO

CREATING ENTREPRENEURIAL
OPPORTUNITIES

Pledge Card

Contact Name: _____

Business: _____

Address: _____

Phone: _____ **Email:** _____

I pledge to support the Macoupin County CEO program in the following ways:

(Please mark an "X" in the box next to each way you will support the program.)

Investor - \$1,000 a year for 3 years ___ Paid annually ___ Paid in one sum

Mentor – Be paired with a student for the course of the school year so that they may call on me with questions and I may offer advice or other support as needed.

Meeting Place – Provide a meeting place for 30 people for up to 4 weeks at a time.

Please note the best months of year for class space:

Tour – The class may tour my business at least one time in the course of the school year.

Guest Speaker – Volunteer to speak to the class about certain business skills or life skills. Please note if there are particular skills you would like to speak on:

Signature

Date

Make checks payable to: **Macoupin County CEO Program, P.O. Box 45; Carlinville, IL 62626**

Macoupin County CEO Program is a 501(c)(3) organization. Donations are tax deductible to the extent allowed by law.