

# Leadership Commerce City

## Building Leadership for a Quality Community

### Leadership Commerce City Application

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

I am fully prepared to actively participate and devote the time and commitment required to complete the Leadership Commerce City Program. I have read and understand the policies of the Leadership Commerce City program in the *Program Course Book* and agree to the terms. I have attached my statement of What Leadership Means To Me and my Employer Approval statement.

Signature \_\_\_\_\_

Payment \_\_\_\_\_ Bill me \$250.00 Business/Corporate \_\_\_\_\_

\_\_\_\_\_ Check \$75.00 Non-profit \$0-\$75,00 budget \_\_\_\_\_

\$125.00 Non-Profit over \$75,000 budget \_\_\_\_\_

\_\_\_\_\_ Credit Card \$40.00 Community Member/Student \_\_\_\_\_

Send payment and application to Dale Mingilton: ([dmingilton@adams14.org](mailto:dmingilton@adams14.org)). Application will not be fully accepted until payment is received.

Application deadline – July 29th, 2017  
Class size will be limited to 25 participants

Please provide the following with the application:



- Payment or instructions for billing
- Employer Approval Statement
- Written Leadership Statement