## SEDU ENTREPRENEURIAL DEVELOPMENT TRAINING COURSE REGISTRATION FORM

	Peachtree			Manageme		
	e you ever d 					No
How	did you lear					E
						Email Brochure
	Other (Sp	ecify)				
First I	Name			Last Nam		
Gende	er	Male	Female			
Addre	ess				Er	nail
Phone	e Number	Land Line			C	ell
Date o	of Birth	Month		Day		Year
Marita	al Status	Married [	Single	Comm	non Law	Other
Last S	School Attend	ded Prir	mary 🔲 S	Secondary [	Unive	ersity Other
Busine	ess Owner	Yes	s N	No		
Emplo	oyee	Yes	s No			
Busine		OU ARE A B				S SECTION
	rship Structu		e Trader [	_		Limited Company
Regist	tration #		of (date	·)		_
Telepl	hone		Fax		Ema	ail
No. of	persons em	ployed	Female	s	N	/ales
Initial	Investment	\$	A	Average mor	nthly sale	es \$
Starte	ed with	Bank Loar	n Sav	vings	Other [	
Value	of what the	business ow	ns			
	u keep busir		? Y	es	No 🗌	
<b>PAYM</b>	ENT FOR CO			MUST be made		

Paid By \_\_\_\_\_