

For office use.

E P F A AK

PLEASE PRINT OR APPLY ONLINE at [www.alaskachamber.com](http://www.alaskachamber.com)



Student's Last Name		First Name		Birth Date (m/d/y)	<input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address			Apt #	Home Phone ( )	
City	State	Zip Code		Student Cell ( )	<input type="checkbox"/> Text Messages okay
County		Student's Email Address			
High School		Academic Grade you will complete in <i>June 2011</i> : <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior			
T-Shirt Size: <input type="checkbox"/> Sm <input type="checkbox"/> Med <input type="checkbox"/> LG <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL					
Activities/Clubs: <input type="checkbox"/> DECA <input type="checkbox"/> JA <input type="checkbox"/> Honor Society <input type="checkbox"/> Other _____					
How or where did you hear about the Alaska Business Week program?					

**PAYMENT INFORMATION**

Registration Fee to be paid by Participant: \$425  
 • Includes meals, lodging and program materials.  
 Total actual cost per student to operate the program is approximately \$1,200. Generous contributions from Business Week sponsors cover \$775 of that cost. **YOU PAY JUST \$425!!!**

You may send your registration fee with this registration form. Any unpaid balance of your registration fee is due within three weeks of the date you receive notification that you are accepted into the program unless special arrangements have been made. Failure to pay the fee and complete required forms may result in cancellation of your registration.

**NOTE:** If you wish to make arrangements for a payment plan, please contact the Registrar at the Business Week office at: (800) 686-6442.

**Please select an option:**

- My \$425 registration fee is attached. (Please make check or money orders payable to *Washington Business Week*.)
- I will pay the registration fee within three weeks of receiving notice of acceptance into the program (unless I make special arrangements with the BW Registrar).
- I am requesting financial assistance. (To apply for financial assistance, please complete the Financial Assistance section on the back.)
- Please charge the registration fee to the credit card below. (Your credit card statement will show: *Washington Business Week*.)

**PARENT/GUARDIAN INFORMATION**

Parent/Guardian #1		Parent/Guardian #2		\$	<input type="checkbox"/> Visa	<input type="checkbox"/> M/C	<input type="checkbox"/> AmEx	<input type="checkbox"/> Discover	<b>Cancellations</b> If you must cancel for any reason, please notify us as soon as possible. <b>Refund Policy</b> • A full refund is given if you cancel by July 10, 2011. • A partial refund will be given if you cancel after July 10, 2011. You will be refunded all but \$50. • Once the program begins, no refunds will be given except for valid medical reasons. If this is the case, your registration fee less \$100 will be returned.
Relationship		Relationship		Account #			Exp. /		
Primary Phone ( )		Primary Phone ( )		Name as it appears on credit card					
Place of Employment/Title		Place of Employment/Title		Billing Address			Phone ( )		
Work Phone ( )		Work Phone ( )		City		State	Zip Code		
Cell Phone ( ) <input type="checkbox"/> Text Messages okay		Cell Phone ( ) <input type="checkbox"/> Text Messages okay							
Email Address		Email Address							

**ACCEPTANCE INSTRUCTIONS**

After review of your application, you will be notified by email of your acceptance status. If accepted, you will receive acceptance instructions and a link to our Medical Release and Code of Conduct forms which must be completed within three weeks of your acceptance. Approximately two weeks before the start of the program you will receive additional information and last minute instructions.

**ACCEPTANCE EMAIL ADDRESS**

Please provide an email address that will be checked regularly and will not be changed until after August 2011 (i.e. parent or guardians email address). All correspondence and acceptance materials will be emailed directly to this address. Be sure to add <a href="mailto:registrar@wbw.org">registrar@wbw.org</a> to your safe list.		If accepted, I agree to make a sincere effort to push myself and grow during the week.	I give my support and permission for my student to attend a Business Week Program.
Acceptance Email Address	Alternate Email Address (Optional)		
		STUDENT SIGNATURE	PARENT SIGNATURE

Student's Last Name

Alaska Business Week is a program of the Alaska State Chamber of Commerce and The Foundation for Private Enterprise Education 501(c)(3). We provide equal opportunity to participate in all the rights, privileges, and activities sponsored by the organization regardless of the participant's race, color, sex, national or ethnic origin, religion, or sexual orientation. The Foundation does not discriminate in the administration of its educational scholarship policies and strives to provide every student full opportunity of participation in all scheduled activities.

TRANSPORTATION OPTIONS

Transportation to and from Fairbanks is not provided as part of the Alaska Business Week registration fee. However, due to the generous contributions of our sponsors, limited transportation assistance is available. **Students should arrive at the UAF campus no later than 11:30 a.m. on Sunday, July 31st.** Registration is open from 10:30 a.m. – 12:00 p.m.

**SATURDAY, JULY 30th:** All students from outside of the Fairbanks area arriving on 7/30 will be checked into the UAF dorms at no additional charge. Shuttles will be provided from/to the Fairbanks International Airport and the Fairbanks Train Depot to/from the UAF campus.

➤ AIR

I have made my air reservations. OR  I will travel by air.

Arrive July 30: Flight #: \_\_\_\_\_ Airlines: \_\_\_\_\_ Arrival Time: \_\_\_\_\_ a.m./ p.m.  
Depart Aug 6: Flight #: \_\_\_\_\_ Airlines: \_\_\_\_\_ Departure Time: \_\_\_\_\_ a.m./ p.m.

**ERA ALASKA** is providing a **limited number of free round-trip tickets** to qualifying students from communities served on their routes outside of Anchorage. Alaska Business Week will award these tickets on a first-come, first-served basis.

I live in an Era Alaska served community and need airfare assistance.

(If you are awarded an Era ticket, you will be contacted by ABW for further details.)

**DISCOUNTED AIRFARES:** Era Alaska is also offering a **25% discount** to participants on **Era Aviation, Frontier Flying Service, or Hageland Flying Service.**<sup>(1)</sup>

➤ TRAIN

I would like to receive a free round-trip ticket on the Alaska Railroad.

For students traveling from Anchorage, the **Alaska Railroad Corporation** has generously offered to provide **free round-trip transportation from Anchorage** to the Alaska Business Week program in Fairbanks. Chaperones will be provided on the train. The train will depart from Anchorage early morning **Saturday, July 30<sup>th</sup> and return on August 6<sup>th</sup>.** Students will check-in at UAF that night. Recipients of tickets will be contacted with more information.

➤ AUTOMOBILE

I will be arriving by car on \_\_\_\_\_ (date) around \_\_\_\_\_ a.m./ p.m.

I will have my car on campus while I am at Alaska Business Week.

If you bring your car to Alaska Business Week, you will be asked to park in a special parking lot. You will be required to purchase a \$15 parking pass for the week and check-in your keys with the housing staff. Do not plan to use your car during the week. **NO EXCEPTIONS!**

**Please contact Ann Ringstad, Alaska Business Week program director, with any transportation questions at: 907-474-5922 or email at: ann@alaska.edu.**

<sup>(1)</sup> This fare discount is valid only for participants of the 2011 Alaska Business Week to be held in Fairbanks, Alaska. The discount applies to all fares, excluding companion, excursion or promotional fares. Space is to be booked in the same class of service as the fare being discounted and is based on availability. All fare rules and some restrictions apply. Tickets are valid for one year from date of original outbound travel. Travel that occurs outside of the travel dates of July 30-August 6, 2011 will require a fare upgrade. RESERVATIONS: All reservations for discounted tickets must be made directly with Era Alaska at 1-800-866-8394. Passengers must reference Event ID Number ABW11 to receive this special fare. (See: <http://www.flyera.com/timeTables.html>)

FINANCIAL ASSISTANCE APPLICATION

Our goal is to ensure that every student is given the opportunity to attend the program. Financial assistance is available to families who cannot afford the full \$425 registration fee. These funds are provided by our contributors and are limited. To request financial assistance, please completely fill out the information below. If information is missing, the application for financial assistance will not be considered. **All financial assistance applications should be submitted as early as possible, but no later than July 20<sup>th</sup>, as funds are limited.**

**TO BE COMPLETED BY THE PARENT/GUARDIAN**

Please complete the financial assistance application in its entirety or it will not be considered.

Indicate total monthly household income before taxes (excluding the student's income):  
 Under \$2,000     \$2,000-\$3,000     \$3,000-\$4,000     \$4,000-\$5,000

Number of family members supported by this income: \_\_\_\_\_

Does the student qualify for a school lunch program?  Free     Reduced     No

Indicate the student's employment status:  Year round     School breaks     Not employed

Indicate the student's income: \_\_\_\_\_

Please indicate the maximum amount of the \$425 registration fee you feel you can afford to pay:  \$350     \$300     \$250     \$200     \$150     \$100

*In most cases, the family or another source must pay a minimum of \$100. If none of these amounts is truly affordable, please contact the Registrar after you have submitted this application. If you wish to make arrangements for a payment plan, please contact the Registrar at: (800) 686-6442 or registrar@wbw.org.*

**REQUIRED - Explain why you would like to be considered for financial assistance. Include any special circumstances. (Attach an additional sheet if more space is needed.) PLEASE PRINT.**

**I hereby acknowledge that all the included information is truthful and accurate to the best of my knowledge. I understand that falsification of any information regarding my financial status will disqualify my student from receiving financial assistance.**

PARENT/GUARDIAN SIGNATURE

DATE