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# SARAI2SARAH

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Entrepreneurship Academy

2016-2017  
Membership Application



Please complete this form in its entirety.  
Partial applications will not be accepted.

RETURN COMPLETED APPLICATIONS TO [INFO@SARAI2SARAH.COM](mailto:INFO@SARAI2SARAH.COM) OR MAIL TO  
2028 HARRISON STREET, SUITE 204, HOLLYWOOD, FLORIDA 33020

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August 2016

Dear Applicant,

My name is Tiffany Brown and I am the founder of the Sarai2Sarah Entrepreneurship Academy, a leadership and entrepreneurship development program that introduces entrepreneurship principles to young ladies. Sarai2Sarah, Inc. would like to thank you for your interest in applying for admission into our program!

Sarai2Sarah seeks young ladies in grades 6-8 that are ambitious, creative and motivated, with a strong interest in starting her own business. Sarai2Sarah participants are required to maintain a 2.0 grade point average, attend meetings, and participate in scheduled activities. The young ladies of Sarai2Sarah meet twice a month for workshops on a variety of topics concerning life and education goals, etiquette, entrepreneurship, professional, personal and spiritual development.

The workshops are led by business owners and professionals who will also serve in a mentor capacity to the program. Although Sarai2Sarah does encourage academic excellence, the focal point of the program is to teach principles of entrepreneurship and leadership.

For any questions or concerns, please feel free to send an email to [info@sarai2sarah.com](mailto:info@sarai2sarah.com) or call us at (786) 766-0852.

Sincerely,  
Tiffany Brown

## MEMBERSHIP APPLICATION

### APPLICANT INFORMATION

Name:

Date of birth:

Age:

Current address:

City:

State:

ZIP Code:

Email:

Phone:

### PARENT/GUARDIAN INFORMATION

Parent/Guardian Name:

Current address:

City:

State:

ZIP Code:

Email:

Phone:

### EDUCATION

Current School:

School Address:

City:

State:

ZIP Code:

Grade:

G.P.A.:

Counselor Name:

### EXTRACURRICULAR ACTIVITIES

Name of Organization

Positions Held

Organization Type

### SPECIAL TALENTS/GIFTS

ADDITIONAL REQUIREMENTS

1. Describe your dream job.
  
2. Please attach a 1 paragraph description of a business idea that you would like to bring to life. How is this business idea different from others? Why do you want to bring this business to life?

SIGNATURES

I give permission to my daughter to apply for membership with the Sarai2Sarah Entrepreneurship Academy. I understand that I must provide transportation for her to attend meetings and activities. \_\_\_\_\_ Initial

I give permission Sarai2Sarah, Inc. to use or release any photos of my child, taken for the purpose of promoting the programs. \_\_\_\_\_ Initial

Signature of Applicant:

Date:

Signature of Parent:

Date: