

PRCC
Youth Entrepreneur
CHALLENGE

Personal Information:

First Name

Last Name

Age

Grade

School

Email

Phone Number

Business Information:

Company Name

Product /Service/Idea Description

Have you invested any money into your business/idea so far? (Not including “sweat equity”)

How does your business make money? What are your expenses?

Why are you passionate about your business?

What inspired the idea for your business?



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Business Category:

- | | |
|--|---|
| <input type="checkbox"/> Food & Beverage | <input type="checkbox"/> Technology |
| <input type="checkbox"/> App / Website | <input type="checkbox"/> Housewares / Home Design |
| <input type="checkbox"/> Health / Wellness / Nutrition | <input type="checkbox"/> Fitness / Sports |
| <input type="checkbox"/> Beauty | <input type="checkbox"/> Clothing / Fashion |
| <input type="checkbox"/> Toys / Games | <input type="checkbox"/> Entertainment / Experiential |
| <input type="checkbox"/> Children | <input type="checkbox"/> Pets |
| <input type="checkbox"/> Music | <input type="checkbox"/> Holiday / Seasonal |
| <input type="checkbox"/> Other | <input type="text"/> |

Current Business Category:

- Business Idea
- Operating Business
- Family Business (succession planning)

Photo and Video Release:

Please have a parent/legal guardian complete the following and send back to info@pineyregionalchamber.ca by April 20th, 2026.

I authorize the Piney Regional Chamber of Commerce to publish photographs, videos and the name of my child in Piney Regional Chamber of Commerce digital and print marketing and advertising materials.

I release the Piney Regional Chamber of Commerce from any expectation of confidentiality for the aforementioned minor. I attest that I am the parent or legal guardian of the child listed below and that I have the authority to authorize the Piney Regional Chamber of Commerce to use their photographs, videos, and name.

I acknowledge that participation in publications produced by the Piney Regional Chamber of Commerce confers no rights of ownership whatsoever. I release the Piney Regional Chamber of Commerce, its contractors, employees and volunteers from liability for any claims by me or any third party in connection with my participation or the participation of the aforementioned minor.

Student's Name

Date

Parent/Guardian's Signature

Parent/Guardian's Printed Name



Piney Regional Chamber of Commerce
PO Box 44, South Junction, MB R0A 1Y0
204-905-2763 info@pineyregionalchamber.ca