



TECHNOVATEYOUTH
INCUBATOR FOR TECHNOLOGY AND INNOVATION

Introduction to Entrepreneurship



AUGUST 3-11, 2021

includes 2 Entrepreneurship Classes (virtual); 2 full days of on-site creating;
½ day of project finishing (if needed); follow-up supports to start your business!

**REGISTRATION
DEADLINE:
JULY 23, 2021**



Use Technology, Innovation and Hands-On Creating to Build Your Business Idea!

We welcome youth 10-17 years of age to our Technovate Youth program: Introduction to Entrepreneurship.

Participants will attend 2 virtual sessions plus 2 on-site activity days. We are excited to be taking over the makerspace at Legacy DIY (Lloydminster) and utilizing their expert creators for this unique program that will nurture ideas for starting businesses. Participants will experience up to 6 maker skillsets, as well as learning how those skills could lead them to starting their own business.

The Program:

Entrepreneurship 101 virtual session: participants will join us for 1 session (choose your day)

2:00 – 4:00 pm on Tuesday, August 3 OR 6:00 - 8:00 pm on Wednesday, August 4

2 Days On-Site at Legacy DIY:

Saturday, August 7 (10 am to 4:30 pm)	Sunday, August 8 (10 am to 4:30 pm)	Monday, August 9 (10 am to Noon)
Hands-On Making	Hands-on Making	Extra time if participants need to finish any projects (alternative time can be arranged)
Business Planning and Lunch	Marketing and Lunch	
Hands-On Making	Hands-on Making	
Hands-On Making	Hands-on Making	

Launch Your Business virtual session: participants will join us for 1 session (choose your day)

2:00 – 4:00 pm on Tuesday, August 10 OR 6:00 - 8:00 pm on Wednesday, August 11

Participants who take their business idea to the next level will have access to continued business supports from the teams at Community Futures Lloydminster & Region and Startup Lloydminster. Additionally, Legacy DIY has generously offered selling space in their Market for program graduates to display and sell their business products!

*** Participants younger than 10 years of age may qualify to attend, but will require a parent/guardian to attend the full days of on-site activities with them in order to manage safe use of the equipment, tools, and machines.*

REGISTRATION FORM



PARTICIPANT NAME		Parent/Guardian Name	
MAILING ADDRESS		TOWN	Postal Code
EMAIL	PHONE (Parent/Guardian)	PHONE (Participant)	
AGE	T-SHIRT Size and type: adult or youth size		
KNOWN ALLERGIES:			

Entrepreneurship 101 virtual session: choose your session date	
2:00 – 4:00 pm on Tuesday, August 3	
6:00 - 8:00 pm on Wednesday, August 4	

Rank your Hands-On Skillsets that you would like to try from 1-5, with 1 being your top choice:	
Skillset	Rank
Jewelry making	
Pottery	
Blacksmithing	
Woodworking	
Leathermaking	

Participants will get to try 2 of these skillsets PLUS everyone will be completing Design, Silk Screening, Vinyl Work and Sign Making.

Launch Your Business virtual session: choose your session date	
2:00 – 4:00 pm on Tuesday, August 10	
6:00 - 8:00 pm on Wednesday, August 11	

During the program, my child will attend the scheduled sessions with their full attention and commitment	YES	NO
My child will be willing to work with the facilitators, instructors, and mentors in a safe and respectful manner.	YES	NO
I will monitor my child's health for illness and will inform organizers if they are sick or symptomatic and will withdraw from the program as needed	YES	NO

Don't delay in registration – only 20 spots available! Thanks to our generous funders, this program will be offered at no charge. If a participant withdraws after July 23, a cancellation fee of \$100 may be implemented.

SUBMIT by JULY 23, 2021 to: cmcgirr@albertacf.com

Corinne McGirr, General Manager, Community Futures Lloydminster and Region
Contact us at 780-875-5458 with any questions you may have.

PARENTAL/GUARDIAN CONSENT FORM

I, _____ (parent/guardian) give consent for my child/youth _____ to participate in the Technovate Youth Entrepreneurship program and activities scheduled and provided by Community Futures Lloydminster and Region, Legacy DIY, Startup Lloydminster, Alberta Innovates and the East Central Alberta Regional Innovation Network (hereafter referred to as "The Providers").

I hereby waive and release any and all claims, demand or causes of action (whether founded upon contract, statute, common law or otherwise), and release from all liability and agree not to sue, the Providers and its officers, employees, agents and contractors for any illness, personal injury, death, property damages or other loss of any kind, including economic loss, as a result of or in any way connected to the Child's participation in the Program due to any cause whatsoever including, but not limited to: negligence or gross negligence; breach of any other duty imposed by law, including any duty imposed by occupier's liability or other legislation; breach of any contract, and; mistakes or errors in judgment or any kind on the part of The Providers. _____ (initial)

I understand that Rules and Regulations are designed for the safety and protection of participants in the program. I understand and agree that I am solely responsible for the Child's behavior and that they will obey the Rules and Regulations, and any other policies, rules, directions regarding the participation in the Program enacted or communicated by The Providers from time to time. _____ (initial)

I understand that The Providers organizations and staff are not responsible for any physical illness, condition, or injury, including COVID-19 that may happen during my child/youth's participation in any events, programs, or activities organized by The Providers. I acknowledge there are inherent risks in the child/youth's participation in the Program, which include but are not limited to collisions, slips, falls, accidents, illness, bodily contact (whether deliberate or accidental) and physical injury. _____ (initial)

I understand that The Providers organizations and staff are not responsible for the safekeeping or loss/damage of my child/youth's personal property. _____ (initial)

I voluntarily assume all risks and damages associated with the child/youth's participation in the Program and elect to allow my child to participate in the Program in spite of these risks. I accept full responsibility for the Child/Youth's participation in the Program. _____ (initial)

I acknowledge and understand the implications of this consent form.

Signed at _____ (location) this date _____ of 2021.

Print Name of Parent/Guardian

Signature of Parent/Guardian