



Community 1st Credit Union

# PITCH *it* PERFECT

## Entrepreneur Pitch-It Contest



# ENTRY FORM

Your Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Please indicate which award you are applying for:

- C1st \$3,000 Award - Restricted for immigrant business owners*
- Legacy Foundation \$3,000 Award - Restricted for businesses located in Wapello County*
- I am eligible for and applying for both awards**

Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

### OVERVIEW:

1. Please explain/describe your business. What product of services do you offer and who is your customer? Why are you in business?

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2. How would you use the pitch-it funds if awarded? How will the funds help your business achieve your goals?

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3. For this venture, will you lease, purchase or own your location?

Lease       Purchase       Already own space

4. What is your background/experience in operating this type of business?

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5. Will you, the owner, manage the business? Yes  No

If not, what will your role be?

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6. How many additional employees, if any?      \_\_\_\_ Full time      \_\_\_\_ Part time

7. Will you offer benefits? Yes  No

If yes, what type of benefits? \_\_\_\_\_

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8. What is your service area? Local community, county, Midwest, national? Explain.

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9. Describe at least three marketing directives/efforts. Who will conduct these efforts and what are the expected results? (*Website, in person sales, online sales, trade shows, etc.*)

1) \_\_\_\_\_  
\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_

3) \_\_\_\_\_  
\_\_\_\_\_

4) \_\_\_\_\_  
\_\_\_\_\_

5) \_\_\_\_\_  
\_\_\_\_\_

10. What are some potential markets you have identified?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Who is your competition? What is your competitive advantage?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Have you received technical assistance from other sources? (*Regional Entrepreneurship Center, Main Street Iowa, SBDC, college or university, local development organization, SCORE, vendor or supplier?*)

If yes, what type of assistance?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. What is your personal investment in the business? What is your “skin in the game”? Include all sources.

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14. How does/will your business benefit the community?

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15. If you do not win this competition, how will you proceed?

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***\*A copy of a budget including project expenditures must be included with your application.***

**SIGNATURE:** *(Required)*

- The business applicant assures that the representations made in this application, including all exhibits and attachments, are true and correct to the best of the entity’s knowledge.

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**Signature** *(Business Owner)*

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**Date**

**To be eligible for pitch-it competition, completed application must be turned in August 31, 2016.**

