



**CAMP MANITO-WISH YMCA LEADERSHIP PROGRAM  
ON-LINE PROSPECT/REFERRAL INFORMATION REQUEST**

Your name: First / Last / Job Title

Your organization:

Phone:

Secondary phone:

Email:

Address: Street / City / State / Zip

Approximate group size:

Age range of group:

Optional: Approximate date for your event (month / year)

Type of Leadership Development Program you are interested in (check as many boxes as applicable):

I am interested in general information on the Manito-wish Leadership Development Program

I want to discuss specific leadership program options for my group

I want to discuss incorporating your program into our Leadership curriculum

Please add any additional comments, questions or requests in the field below: