

LEADERSHIP WEST ORANGE

A program of the West Orange Foundation



FACILITATED BY



**SUBJECTS AND INDUSTRIES
EXPLORED**

Civics and Law

Education:

Traditional and Non-Traditional

Environment and Sustainability

Health and Wellness

Manufacturing and Distribution

Sports

Tourism

Transportation and Infrastructure

Scan to learn more about
Leadership West Orange



The Time Is Now To Begin Your Leadership Journey

Applications are now being accepted for the 2025 – 2026 Leadership West Orange class. Leadership West Orange, a program of the West Orange Foundation and facilitated by the West Orange Chamber of Commerce, is a “hands-on” non-traditional learning environment designed to educate future leaders from the West Orange community. Through a series of thoughtfully developed classes, participants gain exposure to prominent businesses, economic initiatives, and get a behind-the-scenes look into critical issues and challenges facing Central Florida.

Facilitated by the West Orange Chamber of Commerce for over two decades, graduates of the Leadership West Orange program include many prominent and influential business leaders, educators, and elected officials.

Participants who take up the leadership challenge can expect to explore and learn about different areas of importance to our community and economy in ten sessions total over nine consecutive months.

Like no others, the Leadership West Orange Program will open the mind, expand viewpoints, and encourage discussions. It is a program that truly broadens horizons.

To find out more about this unique and exceptional program, contact Artena Greene at (407) 656-1304 or via email at agreene@wochamber.com.

**All applications for the 2025 –2026 session of Leadership West Orange
must be received by Friday, August 15, 2025.**

PRESENTED BY



To learn more about the West Orange Foundation, visit wochamber.com/west-orange-foundation



Leadership West Orange

PERSONAL INFORMATION

Full Name (First, Middle & Last)

Preferred Name

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Home Address

City

State

Zip Code

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Cellphone Number

Home Number

Personal Email Address

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Date of Birth (*mm/dd/yyyy*)

Gender

	<input type="radio"/> Female <input type="radio"/> Male
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Emergency Full Contact Name

Relationship

Telephone

		<input type="radio"/> Cell <input type="radio"/> Home <input type="radio"/> Work
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WORK DETAILS

Employer

Title/Position

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Business Phone

Work Email

	<input type="radio"/> Cell <input type="radio"/> Direct Line	
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Address

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Do you have the support of your company to participate in the Leadership West Orange program? ☐ Yes ☐ No

Please list the name and contact details for your immediate supervisor.

Name

Email

Telephone

		<input type="radio"/> Cell <input type="radio"/> Direct Line
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ADDITIONAL INFORMATION

Shirt Size

Cut or Type

<input type="radio"/> S <input type="radio"/> M <input type="radio"/> L <input type="radio"/> XL <input type="radio"/> 2XL <input type="radio"/> 3XL <input type="radio"/> 4XL <input type="radio"/> Other:	<input type="radio"/> Men's <input type="radio"/> Women's
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Do you have any dietary restrictions or food allergies? ☐ No ☐ Yes If yes, please check the appropriate box.

☐ Vegetarian ☐ Vegan ☐ Gluten-Free ☐ Kosher ☐ Halal ☐ Lactose Intolerant ☐ No Shellfish ☐ No Nuts

☐ Other (please list): _____

What is your drink of choice? Please choose no more than 2.

☐ Coke ☐ Diet Soda ☐ Sprite ☐ Ginger Ale ☐ Orange ☐ Gator Aid ☐ Water (regular) ☐ Water Sparkling Flavored

What type of snacks do you prefer? Please choose no more than 3.

☐ Candy (*non-chocolate*) ☐ Candy (*chocolate*) ☐ Chips ☐ Cookies ☐ Kind Bars ☐ Other: _____

MEDICAL INFORMATION

Are you able to perform essential functions for the class with or without accommodation? ☐ Yes ☐ No

If "No", describe the function(s) that cannot be performed or requires accommodation.

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The West Orange Foundation complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants who participate in the Leadership West Orange Program.



Leadership West Orange

MEDICAL HISTORY

Asthma ☐Yes ☐No

Epilepsy ☐Yes ☐No

Back, Neck, Knee Issues ☐Yes ☐No

Broken Bones ☐Yes ☐No

Diabetes ☐Yes ☐No

Pregnant (currently) ☐Yes ☐No

Heat Exhaustion ☐Yes ☐No

High Blood Pressure ☐Yes ☐No

Blacked Out ☐Yes ☐No

Chest pains, palpitations, or heart murmur? ☐Yes ☐No

Heart disease or attack? ☐Yes ☐No

Check any of the following current allergies.

☐Poison Ivy ☐Ants ☐Pollen ☐Bees ☐Grass ☐Medication ☐Other: _____

If any of the above items are checked, please explain any allergic reaction (treatment, prevention, consequences).

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PAYMENT INFORMATION

Program Payment Amount: ☐\$1800 (*Chamber Member*) ☐\$2400 (*Non-Chamber Member*)

Method of Payment: ☐Send Invoice ☐Credit or Debit Card

Options for credit or debit card payments.

- Payment can be made through the West Orange Foundation page of the West Orange Chamber of Commerce website. Go to <https://wochamber.com/>, click on "About" and choose "West Orange Foundation". Click on the "Donate Today" button and choose "Donate with a debit or credit card". Once there, add the amount of your tuition. In the memo section, type Leadership West Orange.
- Or, add your debit or credit card details below.

Payment Authorization

Cardholder's Name	Card Number	Expiration Date	CVV	Billing Zip Code

I authorize the West Orange Foundation to charge the card listed above in the amount of \$_____ to cover the cost of the Leadership West Orange program tuition.

Signature

Date

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Leadership West Orange Commitment Pledge

The Leadership West Orange program requires dedication, a commitment of time, and the right spirit to fully participate and assimilate the many new and exciting experiences provided by our host organizations. By signing this commitment pledge, you understand and agree to:

- Attend all sessions from orientation through graduation.
- Travel to and from any sessions with your classmates via the transportation provided by the West Orange Foundation.
- Where extraordinary circumstances warrant, due to adverse weather conditions or other unforeseen session interruptions, the West Orange Foundation reserves the right to cancel the session.

I understand this application signifies not only my agreement but my commitment to completing the Leadership West Orange program.

Signature

Date

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