



Ambassador Club Application

Please take a few minutes and fill out the questionnaire below. This will enable us to evaluate your time availability for the Ambassador Club.

Date: _____

Name: _____

Job title: _____

Name of Firm/Organization: _____

Type of Business/Profession: _____

Mailing Address: _____

Work Phone: _____ Home Phone (optional): _____

Mobil Phone: _____ Fax: _____

Email: _____

What community group(s) or service organization(s) do you now belong to or have you been involved with and what is your role in each (President, Board member, and member at large)?

What were some of your major contributions to the group(s) or organization(s) you now belong to or have belonged to?

Why do you want to be an Ambassador, and what are your expectations from the Ambassador Club?

What can you bring to the ambassador Club?

How much time are you able to commit weekly to the Ambassador Club (ribbon cutting and ground breaking ceremonies, mixers, monthly membership meetings, luncheons, and other special events)? _____

Are you able to attend after hours mixers (2nd & 4th Thursday) from 5:30-7:30pm? _____

Are you able to attend monthly Ambassador meetings from 12:00-1:00pm (day TBD at first meeting) _____