Ambassador Application - Leeds Area Chamber of Commerce

Name	Referred by		
What type of Ambassador are you applying for?			
Individual	Business/Corpo	orate	Student
Business Name			
Business Address		City	Zip
Home Address		City	Zip
Work Phone	Home Phone	C	ell Phone
Email Address			
Which Ambassador Category are you interested in?			
Active (attends most events, meetings, ribbon cuttings, etc.)			
Task (may not be able to attend most meetings, but can work specific events or assignments)			
Please circle areas of interests or skills:			
Administrative	Public Relations/Marketin	g	Membership
Monthly Luncheon	Business After Hours		Breakfast Events
Ribbon Cuttings	Miss Leeds Pageant		Creek Bank Festival
Special Events	Sponsorships/Campaigns		Tourism/Festivals
Ambassador Leadership	Chamber Leadership		Small Business Support
Legislative	Community Affairs		Christmas Parade
High School Diplomat Program	n		Annual Meeting
Ambassador Availability			
What is your current position with your company?			
Current and previous volunteer positions and organizations:			

Office skills, business equipment you can operate, etc.

Special talents, hobbies, etc.

Why do you want to be an Ambassador?

What do you hope to gain or achieve by being an Ambassador?

What do you hope to contribute to the Chamber and its' members?

How did you hear about the Chamber and Ambassador Program?

Do you have any scheduling conflicts that would prevent you from attending a monthly Ambassador Team lunch meeting? YES NO

We distribute agenda and other information to each Ambassador via email. If you do not have email, please work out another method of regular communication with the Chamber office and Ambassador Chairperson.

Signature

Date

Thank you for your interest in this Chamber Program. Your application will be reviewed by the Board of Directors and you should receive communication regarding your participation in this program within 30 days.