

Ambassador Committee Information

Name:
Chamber Member Employer:
Position/Title:
Business Address:
Business Phone: E-Mail:
Why do you want to join the Ambassador Committee?
Are you involved in any other Chamber or community activities?
What qualities do you have that would make you a good Ambassador?
What can you contribute to the community as an Ambassador?
I understand the purpose of the Ambassador Committee, the requirements of membership and the commitment asked of me.
Signed: Date:
I am interested in serving on the following Task Force Committee(s):
Scholarship/Evening to Wine Down: Golf Outing: Administrative Professionals Day Event: