



Ambassador Application

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Previous Chamber Experience:

Why do you want to be an ambassador:

Additional Interesting Information:

What motivates you? Rank the following in order of importance with 1 being most important:

Money \_\_\_\_\_ Self Satisfaction \_\_\_\_\_ Recognition \_\_\_\_\_

Other \_\_\_\_\_ (please explain)

References:

Name	Company	Phone	Years Known

I hereby certify that I have read and understand the By-Laws and responsibilities of an ambassador to the Saginaw County Chamber of Commerce. If accepted, I agree to carry out the responsibilities of an ambassador to the best of my abilities. Please return this application to the Chamber within 30 days. Application will be voided after that time. You must be an ACTIVE Chamber member to become a Saginaw Chamber ambassador.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit application by email to [Sam@SaginawChamber.org](mailto:Sam@SaginawChamber.org) or by mail to Sam Tany, Saginaw County Chamber of Commerce, 515 N. Washington Ave., 3rd Floor, Saginaw, MI 48607.