



AMBASSADOR COMMITTEE APPLICATION

Name: _____ Title: _____

Business: _____

Business Address: _____

Business Telephone: _____ Fax: _____

Cell Phone: _____ Email: _____

How long have you been a Chamber member? ___New ___Years

How long have you lived in the Hobe Sound area? _____

What has your Chamber involvement been? _____

What other organizations have you been associated with? _____

Why do you want to become an Ambassador? _____

Our Ambassador meetings are currently held at 12 Noon on the first Wednesday of the month. Is this a convenient time for you to attend meetings? ___Yes ___No

If we have ribbon cuttings on that day, the time commitment is sometimes up to two or two and a half hours. Will you be available for that length of time? ___Yes ___No

Occasionally ribbon cuttings will be held on days different from the regular Ambassador meeting days. Will you be available from time to time to attend? ___Yes ___No

Ambassadors are asked to attend as many monthly breakfasts (8:15-9:30 am,) luncheons (11:45 am-1 pm,) and after hours socials (5:30-7 pm) as possible. Will you be able to attend most of these events? ___Yes ___No

Breakfasts ___Yes ___No Luncheons ___Yes ___No
After Hours Socials ___Yes ___No

Ambassadors are asked to act as hosts at the above events by greeting incoming members and guests, and paying particular attention to NEW MEMBERS by introducing them to other members and making them feel welcome. Are you comfortable with that assignment? ___Yes ___No

Ambassadors are asked to talk to prospective new members as they go about their business and personal lives in order to help promote membership in the Chamber. Are you comfortable with that assignment? ___Yes ___No

Date you will be available to begin _____

We thank you for considering becoming a member of the Hobe Sound Chamber of Commerce Ambassador Committee. The Ambassadors are an integral part of public relations with respect to our Chamber members and our community. This Ambassador committee is made up of motivated, enthusiastic, and informed business people who contribute time and energy in order to help make this Chamber the success and shining example that it is in our Hobe Sound community.

After carefully considering this commitment, please read and sign the following statement. Thank you!! ☺

I understand that my signature reflects my willingness to commit to the responsibilities of the Ambassador committee as stated above. In the event that I find that I am unable to fulfill the requirements of this agreement, I will notify the Chamber immediately so that my position may be filled by someone else.

Signature

Date:_____