



Ambassadors' Club
Membership Application

Name: _____ Date: _____

Business Name: _____

Position/Title: _____

Industry: _____

Preferred Phone: _____ Email: _____

Home Address: _____

Birth Date: _____

Reason for Joining:

Special Talents/Interests:

Complimentary Industries to Yours:

- I have received and read the Policies and Procedures Manual
- I can commit to the duties and time requirements of the Ambassador Program consistently

Best Days of the Week for Activities:

Mon Tues Wed Thurs Fri

Signature