



2016 Ambassador Application and Commitment Agreement

Thank you for your interest in the Broomfield Chamber Ambassador Program. You will be a representative of the Chamber and will provide your outgoing personality, time and energy to serve the needs of the Broomfield Chamber. In the process you will grow your business through the positive contacts and relationships you establish through active participation in our Ambassador Program.

Name _____ Date _____

Business Name _____

Business Address _____ City _____ Zip _____

Phone _____ E-Mail Address _____

Please list your skills and/or education that you feel would contribute to the Ambassador Program.

What organizations or community activities have you been involved with and briefly describe your contribution to those organizations?

Why are you applying as a candidate to the Ambassador Program?

List and briefly describe the major opportunities and/or challenges you see facing the Broomfield Business Community.

I have read and understand the *Broomfield Chamber Ambassador Guidelines*. I agree to and will abide by these Guidelines. I understand that I may be asked to leave the Ambassador Program if I am unable to follow the Guidelines.

Ambassador Signature _____ Date _____