

Ambassador Member Application

The Ambassador Council welcomes your interest in serving on our Board of Directors. Please complete and sign this request for consideration by the Membership Committee. Please return to:

*Ambassador Council
Greater Lehigh Valley Chamber of Commerce
Attn: Lauren Spence, VP of Major Events
73 W. Broad St, Suite 5738, Bethlehem Pa, 18018
LaurenS@lehighvalleychamber.org*

Name: _____	Title: _____
Company Name: _____	Cell Phone: _____
Company Address: _____	Office Phone: _____
City: _____	E-mail: _____
State: _____ ZIP: _____	City of residence: _____

Have you been a Chamber member for the past 12 consecutive months?
 Yes No

During the past twelve months, what Chamber or Council programs and events have you participated in?

- | | | |
|--------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Regional Event Attendee | <input type="checkbox"/> Council Event Attendee | <input type="checkbox"/> Major Event Attendee |
| <input type="checkbox"/> Signature Networking Event Attendee | <input type="checkbox"/> Grand Opening/Ribbon Cutting Attendee | |
| <input type="checkbox"/> Regional Chamber Board Member | <input type="checkbox"/> Council Board Member | |
| <input type="checkbox"/> Foundation Board Member | <input type="checkbox"/> Chamber Event Sponsor | |

Why are you interested in becoming a member of the Ambassador Council? _____

Please list any other community or business organizations to which you belong, and any positions you held in each. _____

If you were recommended by Chamber staff or a current Ambassador, please list their name(s) here:

I have read the Bylaws and Policy Statements and accept the requirements of this position, if I am nominated and elected to the GLVCC Ambassador Council:

Signature _____ Date _____