



The Jefferson County Chamber of Commerce  
630 Market Street  
Steubenville, OH 43952  
740.282.6226  
www.jeffersoncountychamber.com

Ambassador Club  
Application For Membership

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

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

Title: \_\_\_\_\_

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

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

Years In Current Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Noteworthy Awards / Honors:

Date(s): \_\_\_\_\_ Award: \_\_\_\_\_

Date(s): \_\_\_\_\_ Award: \_\_\_\_\_

Date(s): \_\_\_\_\_ Award: \_\_\_\_\_

Memberships Held In Other Organizations, Board Positions, Volunteer Activities: Please include dates, titles, organization name, etc. Use reverse side if necessary.

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Please explain why you would like to become a member of the Ambassador Club, what contribution you can make to aid in the growth and development of the group/the Chamber and what you hope to gain from your involvement in the Club \_\_\_\_\_

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The Chamber of Commerce relies on Ambassadors to assist with membership sales, retention activities, special events, monthly programs and ribbon cuttings. In addition, there is a monthly meeting the first Tuesday of each month at 3:30 in the Chamber board room that last approximately an hour. Because of this role, being a Chamber Ambassador requires a time commitment, not a large number of hours, but often during regular work hours and occasionally on a weekend. Does your position have the flexibility that would allow such participation? \_\_\_\_\_

Does your employer and/or immediate supervisor understand and support you being a Chamber Ambassador and the time commitment that it sometimes requires? \_\_\_\_\_

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

Signature of Immediate Supervisor \_\_\_\_\_ Date: \_\_\_\_\_