



Ambassador Program Application

Qualifications for the Program

Applicants must meet all qualifications to be considered for the program.

- Applicants must be employed by an organization that has been a member of the Chamber for at least 1 year.
- Applicants must be employed with your current company for at least 6 months.
- No current Ambassador is represented from the same organization.
- Applicant cannot currently be serving on any other VPC Committee.

Please fill out the information below (please print)

Name: _____ Job Title: _____

Business Name: _____

Business Address: _____

Preferred Contact: Phone: _____ Email: _____

How long with current company: _____ Type of Business: _____

Who referred you to the Ambassador Program? _____

Applicant's Signature: _____

In your own words please answer the following questions

1. Why do you want to become a Chamber ambassador?

2. How would you apply your personal strengths to your role as an ambassador?

3. In your opinion, what value does the VPC provide to the local business community?

Program Commitment:

- Available to volunteer 10-15 hours per month
 - Attend mandatory monthly meeting.
 - Attending at least two networking events per month.
 - Coffee Connections

- Business Connections After Hours
- Ribbon Cuttings
- Spotlight on the Peninsula
- Larger events such as
 - State of the Cities
 - Military Events, etc.
- Meet new members person to person and deliver welcome packets.
- Stay in contact with the new member for a period of 1 year.
- Serve as emcee for connections if needed.
- Volunteer for larger events at check-in tables (usually mid-day)

Program Benefits:

- Recognition as an Ambassador for the Chamber through:
 - Website page dedicated to Ambassador Program
 - Name, bio, picture, business
- Recognition at Connections
- Complimentary tickets to events (management discretion)
- Special invites to nonpublic events (management discretion)
- Ambassador of the Year Award

Applicants must have employer’s support and approval to be considered for this program.

Supervisor’s Approval/Signature:

By signing below, you have given your approval for the employee listed above to participate in the Virginia Peninsula Chamber’s Ambassador Program and have acknowledged the Program Commitments.

Supervisors Name (printed) : _____

Signature: _____ **Date** _____

The Chamber’s management team will review your application. The Ambassador role is highly competitive and may require an interview process. *Please sign below if you wish to be considered for this program.*

Applicant Signature: _____ Date: _____

Please submit application form to Suzy Johnson at sjohnson@vpcc.org



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