



# Confidential Application Chamber Ambassador July 26-June 27

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## **General**

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

## **Employment**

Employer \_\_\_\_\_ Title \_\_\_\_\_

Phone# \_\_\_\_\_

E-mail Address \_\_\_\_\_

What skills do you possess that you feel are an asset to your organization that would also benefit the Ambassador program? \_\_\_\_\_

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## **More About You!**

How would you describe your involvement in the community?

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## Chamber Ambassador Application Contd.

What do you feel is the most important benefit of being a Chamber member?

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What do you hope to gain from being a Chamber Ambassador?

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Does your job grant you the opportunity to attend ribbon cuttings and/or meetings at various dates and times? Yes \_\_\_\_\_ No \_\_\_\_\_

THE CLARKSVILLE CHAMBER REQUIRES 60% PARTICIPATION IN ALL MEETINGS, RIBBON CUTTINGS, OPEN HOUSES, AND EVENTS. IF 60% PARTICIPATION IS NOT MET, TERMINATION IN THE AMBASSADOR PROGRAM WILL OCCUR AND NO REFUND WILL BE ISSUED.

**Application and fee (\$200.00) must be received at the Clarksville Chamber office by June 5, 2026.**

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**Applicant's Signature**

## Important

Please send application and fee:

Clarksville Area Chamber of Commerce  
Melinda Shepard  
P.O. Box 883  
Clarksville, TN 37041  
931-245-4341  
[melinda@clarksville.tn.us](mailto:melinda@clarksville.tn.us)