



*St. John's*  
**BOARD of TRADE**

**Ambassador Program**

**Referral/Expression of Interest – for Ambassador Membership**

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

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

Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

What is your reason for wanting to become an Ambassador?

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How long have you or your organization been a member of The St. John's Board of Trade?

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As an ambassador, attendance at monthly meetings (approx. 2 ½ hours total) is required and participation at various events is encouraged, do you feel you can commit the time to the ambassador's committee?

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Other Volunteer Involvements, Membership, etc.

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How did you find out about the Ambassadors' Committee?

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***Note: Please ensure all fields are complete before submitting application!!!***

***Please Submit to Lori Coleman, Manager of Business Affairs by email:  
[lori@bot.nf.ca](mailto:lori@bot.nf.ca) or fax: 726-2003.***