



ERIE AMBASSADORS: REQUEST FOR VOLUNTEERS

Organization _____

Contact person/title _____

Phone _____ Fax _____ Email _____

Event _____

Date(s) _____ Time(s) _____

Place(s) _____

Brief description of event _____

Impact upon the community/region _____

Duties of the Erie Ambassadors _____

Number of Erie Ambassadors requested/times needed _____

Thank you for your interest in the Erie Ambassadors.

Please return completed form to:

Erie Regional Chamber & Growth Partnership
Attn: Erie Ambassadors Coordinator
208 East Bayfront Parkway
Erie, Pennsylvania 16507
FAX: 814-459-0241