Downtown Ambassador Application



Post Office Box 2235 Wilmington, NC United States 28402 49 950

Date:	
Name:	
Address:	
State/Province:	
Zip/Postal Code:	
Cell Phone:	
Home Phone:	

Preferred Schedule	application. Thanks.		
	Please feel free to attach your resume with your submitted		
() yes () lie			
Hat?			
○ Medium ○ X-Large			
○ Small ○ Large			
Vest Size?			
Preferred name for Name Badge:			
State of Issue:	a little about yourself:		
Driver's License number:	Volunteers will be asked to engage the public. Ideal candidates have strong, out-going personalities. Please tell us		
yes ono			
Do you have a drivers license?	Relationship:		
Seeking Employment	Cell Phone:		
Retired	Work Phone:		
Employed	Home Phone:		
Employment Status	Zip/Postal Code:		
Francisco ent Status	State/Province:		
Home Phone:	Address:		
Cell Phone:	Name:		
Zip/Postal Code:	Person to Notify in Case of Emergency		
State/Province:			
Address:	Fax: 910-343-69: www.wilmingtondowntown.co		
Name:	2840 Phone: 910-763-73		

Week of Month	Day(s) Available	Morning	Afternoon	Evening
1st		Check Box	Check Box	☐ Check Box
2nd		Check Box	Check Box	Check Box
3rd		Check Box	Check Box	☐ Check Box
4th		Check Box	Check Box	Check Box