



# Club Ambassador Program Participation Form

Please complete this form to verify participation in the Club Ambassador Program. It should be filled out during the Toastmasters year (July 1, 2016 – June 30, 2017) and returned to Ed Thelen, DTM, District 35 Club Growth Director by email at [ednthelen@gmail.com](mailto:ednthelen@gmail.com) or mail to 336 N. 67<sup>th</sup> St., Milwaukee, WI 53213. **Form must be submitted to Ed Thelen no later than Friday, April 21, 2017. Participation is limited to District 35 members only.**

(All Area and Division Directors that wish to participate in the Club Ambassador Program must use the Area/Division Director Club Ambassador Form.)

Name \_\_\_\_\_

Member of the following club(s) \_\_\_\_\_

## **Part I**

I verify that I have visited 3 clubs that I do not belong to as of the date of my visit. I had an officer of the club sign this form to confirm my presence.

### **Visit 1**

Date \_\_\_\_\_

Club Name and number \_\_\_\_\_

Print name & Signature of club officer \_\_\_\_\_

### **Visit 2**

Date \_\_\_\_\_

Club Name and number \_\_\_\_\_

Print name & Signature of club officer \_\_\_\_\_

### **Visit 3**

Date \_\_\_\_\_

Club Name and number \_\_\_\_\_

Print name & Signature of club officer \_\_\_\_\_



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## **Part II**

I verify that I attended an Area and a Division event. Area events include Area speech contests and Area Councils. Division events include Division speech contests and Toastmaster Leadership Institutes. I had the Area and Division Directors sign my form.

Area \_\_\_\_\_

Date \_\_\_\_\_

Event \_\_\_\_\_

Print name & Signature of Area Director \_\_\_\_\_

Division \_\_\_\_\_

Date \_\_\_\_\_

Event \_\_\_\_\_

Print name & Signature of Division Director \_\_\_\_\_

## **Part III**

Attendance at the 2016 Fall Conference or the 2017 Spring Convention qualifies. If you are attending the Spring Convention to meet the Part III requirement, indicate that you will be attending. Your signature is your sworn statement that you will attend. You must still submit this form no later Friday, April 21, 2017.

I verify that I attended a District event. I have a signature from an organizer.

If you attended an event outside of District 35, please note the District number below.

Date \_\_\_\_\_

Event \_\_\_\_\_

Print name & Signature of organizer \_\_\_\_\_

By my signature, I verify all statements are true.

Signature \_\_\_\_\_