



California Society of  
Association Executives

*Advancing the Association Community in California*

## CalSAE Ambassador Application

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

Title: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Member Type: \_\_\_\_\_ Regular \_\_\_\_\_ Associate

Region: *(please circle)*

Bay Area

Capital

San Diego

Southern CA

### Ambassador Pledge

I agree to serve as an Ambassador for CalSAE. I will encourage and promote the values and benefits of membership by welcoming new members into CalSAE and acting as a resource on their behalf.

**I understand my commitment to serve is July 1, 2011 – June 30, 2012.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***Please fill out form and fax to: 916-749-3369***

### Questions?

Contact Lindsay Poss at 916-443-8980 or [lindsay@calsae.org](mailto:lindsay@calsae.org).