

Ambassador Application

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ School: _____

Year of Graduation: _____

Extra Curricular Activities (include offices held, clubs, sports and organizations not associated with school): _____

Plans after Graduation: _____

Parent's Name: _____ Address: _____

I am willing to grant permission to "Ron Carroll Designer Portrait Images" to use my portrait in advertising.

Yes No

I will be taking college courses during my Senior Year: Yes No

I am not a representative for another photography studio: Yes No

My school photographer is: _____

My recommendation for an Ambassador

next year would be (must be a Sophomore now): _____

Her address is: _____ Phone: _____

AGREEMENT:

Our Ambassador Program is designed to promote goodwill and improve communications throughout the schools in our area. As an Ambassador you will be a public relations representative for us.

Thanks for your interest in becoming an Ambassador. If your application is approved, we will be in touch with you regarding an "Ambassador Interview" which will provide you with all of the information about the program.

I, _____, realize that this program is geared to help promote Ron Carroll Designer Portrait Images and I will not accept a representative position from another studio. I also realize that I'm under no obligation to purchase photographs. Any violations of this agreement will terminate any commissions that I'm entitled to from referrals.

Applicant's Signature: _____ **Parent's Signature (required):** _____

