



Ambassador/Committee Member Questionnaire

Name: _____

Date of Birth: _____

Social Security #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Website: _____

Services In any Organization/Volunteer Work: _____

Other Services included (Guide, etc.): _____

Please list three (3) references (Name and Phone number)

1: Name: _____

Phone: _____

2: Name: _____

Phone: _____

3: Name: _____

Phone: _____

If you have any questions please contact Tina Pattison at (814) 572-4387.
Please return to the Hunt of A Lifetime representative or mail to:

Hunt of A Lifetime
P.O. Box 241
Harborcreek, PA 16421