



REQUEST FOR SERVICES

Return completed form to
 Woodbury Chamber Ambassadors
 Email it to: ambassadors@woodburychamber.org
 Or Fax it to: 651-578-7276

We need two weeks to process all requests for event services.

PLEASE PRINT CLEARLY OR TYPE			
BUSINESS INFORMATION			
Contact Person Last Name	First Name	Middle	
Company Name			
Business Address			
City	State	Zip Code	
Business Phone	Additional Contact Number	Business Fax	
Email Address			
SERVICES AVAILABLE- TYPE OF EVENT			
Grand Opening	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Ribbon Cutting Ceremony
Ground Breaking	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Anniversary Celebration
Are you currently a member of the Woodbury Chamber?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like us to invite the Mayor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like us to invite the Woodbury Chamber Board?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like us to invite the Woodbury Royal Family?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like a list of VIP's for the City of Woodbury for you to send an invitation to?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like a list of the whole Woodbury Chamber for you to send an invitation to? (Must be a current Chamber Member to receive the whole membership list)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Would you like use of our Grand Opening Banner for the week of your Grand Opening?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
INCLUDED IN RIBBON CUTTING/GRAND OPENING SERVICES			
The Woodbury Chamber of Commerce Ambassadors will provide the following:			
-Ribbon and Scissors for the Ribbon Cutting			
-Grand Opening Banner that you can use for the week of your Grand Opening (if available)			
ADDITIONAL EVENT INFORMATION NEEDED			
Date of Event _____ Time of Ribbon Cutting _____ Time of Entire Event _____			
Any Speakers from your Business that would like to speak at Event? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Name of any Speaker(s)? _____			
Any special information in regards to your event? _____			
Directions to the event? _____			