## 2025 VISITING AMBASSADOR REGISTRATION

AMBASSADOR INFORMATION – Please print clearly (especially email address)		
Name:		
Age (as of Jan 2025):	Current Grac	de:
Address:	Phone:	
City:	State:	Zip
EMAIL: (please provide)		
We are trying to communicate via emai ambassador's email address.	l to save paper. P	Please do your best to obtain your
SPONSOR INFORMATION		
Sponsor/Organization Name:		
Contact Name:		
EMAIL	Phone	
(please provide and write carefully)		
In case of an emergency, the above n	amed person wi	ll be contacted.
Please complete and return this registra	ation along with y	your application fee of <b>\$500.00 by</b>
December 30, 2024. (This is a firm dea	dline.) The fee wi	ill cover lodging, meals, entertainment,
and transportation. Thank You. We look	< forward to meet	ing and escorting your Ambassador.
Make Check Payable to:		

## ST. PAUL FESTIVAL & HERITAGE FOUNDATION (SPF&HF)

429 Landmark Center 75 West 5th Street St. Paul, MN 55102