



# AIM for Awareness Ad Contest

## Ambassadors Form

**School name:** \_\_\_\_\_

### Adult Ambassadors

We would like 5 adults (if possible) to promote the Ad Contest and represent your school. The adults can be the principal, administrative persons, counsellors, teachers, and/or parents/guardians.

**Lead Adult Ambassador:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Adult 2:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Adult 3:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Adult 4:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Adult 5:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Student Ambassadors :

We would like 5 students to promote the Ad Contest and represent your school. (Ideally different grade levels.)

**Lead Student Ambassador:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Student 2:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Student 3:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Student 4:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Student 5:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please return completed form to AIM staff!

If you have questions, please contact Gabrielle at [gabrielle@aimformentalhealth.org](mailto:gabrielle@aimformentalhealth.org)