

Ribbon Cutting Criteria

Ribbon Cutting Requirement Checklist:

- Ribbon cuttings are offered to new businesses (within six months of a soft opening)
- Must have proper business license and permits
- Chamber membership is active and dues are current
- Host may provide light refreshments (e.g. coffee, tea, water, cookies, etc.)
- Host will provide Talking Points: What is your business? What are your products and services? How will you contribute to the community of businesses in Sedona? Some key points that differentiate you or make you notable from other businesses. Due two weeks prior to ribbon cutting.
- Email your completed form to Shanandoah Sterling at ssterling@sedonachamber.com.
- 4 weeks minimum advance notice is required
- Once a date and time has been determined, Chamber staff, Visitor Center volunteers, the Board of Directors and partners will be invited. At least two Chamber staff members will attend. No other participation is guaranteed.

Chamber will Provide:

- Invitation in the Business Bulletin e-News prior to the event.
- The Monday after, a photo of the ribbon-cutting and a short congratulatory message will be in the Monday Business e-News.
- Large ribbon
- Large scissors
- A framed copy of the photograph after the event.
- Social Media mentions

Additional Information:

- For maximum exposure and attendance, we encourage you to spread the word through your social media outlets and local advertising.
- Ribbon cuttings are held Tuesday, Wednesday or Thursday between 10:00 a.m. and 4:00 p.m. only. Times and dates will be based on availability of the Chamber staff and City of Sedona's mayor.
- The agenda of the 30-minute ribbon cutting is as follows:
 - 1. Welcome by host (5 minutes)
 - 2. Welcome by Chamber staff (5 minutes)
 - 3. Welcome by City or County Staff, if applicable (5 minutes)
 - 4. Cut ribbon, take photos (5 minutes)
 - 5. Mix and Mingle (5 minutes)



Application for Ribbon Cutting

Date Application Received:	Approved Date:	Approved By:
For Chamber of Commerce Use		
Thank you for your application. We look for	ward to working with you and n	naking your event a great success.
Additional comments:		
Alternate Dates & Times:		
Event Date & Time Requested:		
Contact Email:		
Business Representative Speaker a	at Event:	
Contact Person:	Phone:	
Physical Address:		
Business Name:		·