



2018 HALLOWEEN CONTRACTOR INFORMATION

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Fed ID#		SS#		
Name:		DOB:	Email:	
Address:		City:	State:	Zip:
Best phone#:		Alt phone#:	Other #:	
Emergency Contact:		Phone #:	Other #:	
Referred By:				
Position Preferred? Actor Other				
Highest level of Education Completed? Not High School High School Tech School College Post Grad				
References: (at least 2 non-relatives)		Can we contact your references? YES or NO		
Reference Name:	Relationship:	How long?	Phone #:	Alt Phone #:
List related Employment Experience related to this position:				
Employer:	Type of Business:	Supervisor:	Phone#:	
Title:	Start Date: (M/Y)	End Date: (M/Y)	Pay Rate:	
Reason for Leaving:				
Employer:	Type of Business:	Supervisor:	Phone#:	
Title:	Start Date: (M/Y)	End Date: (M/Y)	Pay Rate:	
Reason for Leaving:				
Employer:	Type of Business:	Supervisor:	Phone#:	
Title:	Start Date: (M/Y)	End Date: (M/Y)	Pay Rate:	
Reason for Leaving:				
Do you have a Driver's License?			YES	NO
Do you have guaranteed transportation to work?			YES	NO
Are you aware that most positions are performed outdoors and require physical activity?			YES	NO
Do you have physical limitations that may inhibit your ability to work? Ability to Lift? Other?			YES	NO
If you are applying for Halloween position, will you provide your own costume? Props?			YES	NO
Would you prefer to rent a costume for a minimal fee?			YES	NO
If you are applying as seasonal independent contractor, you are responsible for any injuries that you may incur due to your own negligence and/or actions. Hunt Club is not required to carry worker's compensation insurance for independent contractors. Do you understand?			YES	NO
Do you currently have health or accident insurance coverage?			YES	NO
Name of Insurance Provider:		Policy Holder:		
Signature:		Date:		