



EMPLOYMENT APPLICATION

CONTACT INFORMATION

PLEASE PRINT (ANY OFFICIAL MAIL, I.E. FINAL PAY CHECK, TAX FORMS, ETC. WILL BE MAILED TO THIS ADDRESS)

LEGAL NAME: _____ NICK NAME: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: () _____ CELL PHONE: () _____ EMERGENCY () _____

EMERGENCY CONTACT NAME: _____ SOCIAL SECURITY #: _____

GENERAL INFORMATION

ARE YOU UNDER THE AGE OF 18? YES NO ARE YOU UNDER THE AGE OF 21? YES NO

HAVE YOU WORKED THE FESTIVAL BEFORE? YES NO IF SO, WHEN? _____

POSITION HELD: _____ JOB DUTIES: _____

PREVIOUS PAY RATE: \$ _____ PER DAY HOUR HAVE YOU HANDLED MONEY? YES NO

DO YOU HAVE MANAGEMENT EXPERIENCE? YES NO IF SO, FOR WHOM? _____ #YEARS: _____

HAVE YOU WORKED AT OTHER FESTIVAL/S? YES NO WHICH? _____

WORK EXPERIENCE

COMPANY NAME: _____ PHONE NUMBER: _____

SUPERVISOR'S NAME: _____ POSITION HELD: _____

LENGTH OF EMPLOYMENT: _____ JOB DUTIES: _____

POSITION DESIRED

PLEASE CIRCLE YOUR CHOICES

BOOTH MANAGER	SOUVENIR SALES	TICKET TAKER	SOUND CREW
GAMES	FOOD PREP	BEVERAGE RUNNER	ROVING SALES
SITE CREW	BEVERAGE SALES	SECURITY	ADMIN. ASST.

*I AGREE TO WORK ALL 3 DAYS OF THE FESTIVAL

I CERTIFY THAT ALL FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IF EMPLOYED, FALSIFIED STATEMENTS ARE GROUNDS FOR IMMEDIATE TERMINATION.

SIGNATURE: _____ DATE: _____