



# Corporate Event Staff

## **CONTRACTOR APPLICATION AND AGREEMENT**

Job Description: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Mid Initial: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Person to contact in case of Emergency: \_\_\_\_\_

Relationship: \_\_\_\_\_ Telephone #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I \_\_\_\_\_ hereby allow Corporate Event Staff LLC accounts to deposit money in my account.

Account information

Name on Account: \_\_\_\_\_ Account Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

**PLEASE ATTACH A COPY OF A VALID DRIVERS LICENCE AND A COPY OF YOUR SOCIAL SECURITY CARD**

ALL THE INFORMATION PROVIDED ABOVE IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\*\*Please be advised that Corporate Event Staff is a drug free work environment\*\*\***