

## TNT Paintball Employment Application

Date (dd/mm/yy):/
Name:
Phone # Day:Eve:
Street Address:
CityPostal Code:
Date of Birth(dd/mm/yy):/Transportation: Yes/No
Email:
Availability Sat:Sun:Weekdays (which):
Skills you feel will be an asset to TNT Paintball:
Special Skills (i.e. Foodsafe, First Aid):
Other Activities/Interests/Information:
I certify that the information provided on this application is correct to the best of my knowledge and any omissions or false information is grounds for dismissal.
If employed, I agree to follow all rules and directives of the company. However, I understand that my employment can be terminated, with or without cause, and with or without notice, by either the company or myself.
Date:Signature: