zest
Hospitality Training for Africa

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Zest Staff Registration Form

Personal Information

Full Name:	
Date of Birth:	
Telephone Number(s):	
Alternative contact person in the event of emergency:	
E-mail Address:	
Physical Address:	
Own car:	YES NO

Employment

Current employment and job role:	
Previous work experience:	
Qualifications/Training if applicable:	
References (full names and contact details):	

I, the undersigned, fully understand the nature of the Zest staffing programme and am aware that work is not guaranteed at any stage. It has been made clear to me that I am not employed by Zest and work purely on a casual basis and will only be paid for the hours of work I complete. I am aware of the nature of the business, and agree that if I take on a shift, I agree to work the amount of hours required to complete that shift. I am fully aware that if I am offered employment by another company I am able to accept that employment as I am not bound to Zest. I hereby confirm that all the above information supplied is true and accurate.

Signed _____ Date: _____