

CLARKSVILLE ZOMBIE HUNTERS, LLC

"A Zombie Paintball Hayride Experience!"

www.ClarksvilleZombieHunters.com  

yow@clarksvillezombiehunters.com

APPLICATION FOR EMPLOYMENT

Please note: **Applicants must be 16 years of age, fill out application completely, and submit with a photograph of their self in order to be considered.** Submit by email to the following email address:

trey@clarksvillezombiehunters.com.

Last Name: _____ First Name: _____ Date: _____

Position being applied for: _____ Date of Birth: _____

I can commit to working the following dates and hours during the six open weekends Sep 27 - Nov 2, 2019:

(Please Circle Days You Can Work)	Friday Nights	5:00pm – 12:30am
	Saturday Nights	5:00pm – 12:30am
	One Thursday Night (Halloween)	5:00pm – 12:30am

Street Address: _____ City: _____ Zip: _____

Phone Number: _____ Email: _____

Do you possess a Driver's License and/or Reliable Transportation: _____

Have you ever been *charged* with a crime before: (if yes, explain) _____

List your 3 previous employers, including any existing employers, and when you were employed:

Dates Employed	Employer	Duties while employed
_____	_____	_____
_____	_____	_____
_____	_____	_____

What is your level of education: _____

Why do you want to work with Clarksville Zombie Hunters, LLC? _____

Why would you make a great asset to the Clarksville Zombie Hunters family? _____

Please list two references' names and phone numbers: _____

I hereby certify that the information provided above is true and correct. _____

(Signature of Applicant)