

**CASUAL WORKER
REGISTRATION FORM
FOR
HENLEY ROYAL REGATTA**

SLB Services
101 Elmhurst Estate
Batheaston
Bath
BA1 7NR
Tel. 01225 851328

HRR Ref:

Please enclose a recent
passport size photograph of
yourself. Print your name
on reverse (Do NOT stick
or staple photo to the form)

PLEASE COMPLETE FORM IN BLOCK CAPITAL LETTERS

PERSONAL DETAILS

FIRST NAME	SURNAME	TITLE	DATE OF BIRTH
CURRENT ADDRESS		NATIONAL INSURANCE	
		<p style="text-align: center;">TAX STATUS</p> <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Exempt <input type="checkbox"/> Employed Elsewhere	
POSTCODE			
TEL NUMBER	MOBILE NUMBER	NATIONALITY	
E-MAIL ADDRESS		TERM TIME ADDRESS (if different from above)	

REFERENCES -

Please give the name & address of two referees. This can include past employers, someone known to the Regatta or a professional

NAME	NAME
ADDRESS	ADDRESS
CONTACT NUMBER	CONTACT NUMBER
RELATIONSHIP TO YOU	RELATIONSHIP TO YOU

NEXT OF KIN - To contact in case of emergency

Times

NAME	Please indicate the earliest and latest times that you are available to work e.g. 7am - 11pm
TEL NO	
RELATIONSHIP TO YOU	TRANSPORT - Please tick box if you have your own transport <input type="checkbox"/>

DATES AVAILABLE FOR WORK - Between 1st June & 30th September

Tick box if available to work for other events. <input type="checkbox"/>	Earliest date avail. to work _____
Unavailable to work between dates	Latest date avail. To work _____
_____ & _____	_____ & _____
_____ & _____	_____ & _____

PLEASE COMPLETE OTHER SIDE

EDUCATION

NAME OF SCHOOL	EXAMINATIONS & GRADES OBTAINED
FURTHER EDUCATION College / University name	SUBJECTS STUDIED & QUALIFICATIONS OBTAINED
OTHER RELEVANT QUALIFICATIONS / AWARDS / SKILLS e.g. First Aid, Food Hygiene	

RELEVANT EXPERIENCE

EMPLOYMENT / RIVER WORK / ROWING EXPERIENCE - Continue on another sheet if necessary

SKILLS

Tick the areas in which you would like to work - if you have experience in working in these areas please list details in above field

REGATTA POSITIONS	GEN ASST / PORTER	CATERING - Waiting / Bar staff
<input type="checkbox"/> Ticket / Programme Sales	<input type="checkbox"/> Table Clearing	<input type="checkbox"/> Supervisor
<input type="checkbox"/> Cloakroom / Toilet Attendants	<input type="checkbox"/> Washing up	<input type="checkbox"/> Silver Service
<input type="checkbox"/> Results Board	<input type="checkbox"/> Kitchen Porter	<input type="checkbox"/> Plate Service
<input type="checkbox"/> Crews Enquiries	<input type="checkbox"/> Glass Washing	<input type="checkbox"/> Bar Person
<input type="checkbox"/> River Marshals / Stake Boats	<input type="checkbox"/> Setting up	<input type="checkbox"/> Tills

I confirm that the information given on this form is to the best of my knowledge true and complete. Any false statement may be sufficient cause for rejection or if engaged dismissal. I authorise the company to obtain a reference to support this application.

Date _____

Signed _____

When completed, this form together with a recently taken passport size photograph should be sent to the address below

Simon Jones
SLB Services
101 Elmhurst Estate
Batheaston
Bath
BA1 7NR

This information will be held on computer subject to the Data Protection Act