## INTERNATIONAL FOLLIES, INC. ENTERTAINER EMPLOYMENT APPLICATION

International Follies, Inc. ("the Company") is an equal opportunity employer. It is the policy of the Company not to discriminate in hiring and employment in accordance with all applicable federal, state and local laws. No question on this application is intended to secure information for an unlawful purpose. This application will be considered active for 30 days.

## **Personal Information**

Name	
Street Address	Apt. #
CityState _	Zip
Phone Number	Email address:
Availability for Wo	<u>ork</u>
When can you start to work as an entertainer? Month: _	Date:
Please indicate the days and shifts you are available to wo	rk:
Day Shift:MTuWThF	Sa
Night Shift:MTuWThF	Sa
Have you ever applied to work at The Cheetah before?	YesNo
If yes, when?	
Have you ever worked at The Cheetah before?	Yes No
If yes, when and in what capacity?	
Person to Notify in Case of	Emergency
Name:	
Address:	
Phone:	

I acknowledge that my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I understand that no representative of the Company, other than the President of the Company, has any authority to enter into any agreement for employment for any specified period of time or to make any agreement that contradicts or modifies the foregoing in any manner. Any written or oral statements to the contrary are hereby expressly disavowed and should not be relied upon by current or prospective employees.

Email:

I acknowledge that consent to and successful completion of a drug test upon request at any time is a condition of employment and continued employment with the Company. I hereby release the Company and any individuals who administer such test from any and all liability and damages resulting from the administration of and reliance upon the results of any tests.

I hereby consent to a breathalyzer or other testing for blood alcohol content.

I hereby consent to random and specific locker searches and searches of the contents thereof.

I hereby declare the information provided by me in this application for employment as true, correct and complete to the best of my knowledge. I understand that, if employed, any misstatement or omission of fact on this application shall be considered cause for discharge.

Signature

Date