

## **Temp Staff Order Form**

(e.g. Hostesses/host, sales assistants etc)

NAME OF PERSON

YOUR DETAILS (please complete the yellow shaded areas in capitals)

Forename:

ADM 3884, London, SW1A 1ZW, UK t: +44 (0)3451304548 e: info@bondassociates.co.uk www.bondassociates.co.uk

TO THE CITY ENCOTE							
COMPANY DETAILS		Company Name:					
		1st Line of Address:					
		2nd Line:					
		3rd line:					
		City:		Postcode/Zip:		Country:	
		Telephone Number:		Fax	ax Number:		
		Email Address:					
STAFFING REQUIREMENTS (please complete the yellow shaded areas in capitals)							
NUMBER OF STAFF REQUIRED		TYPE OF STAFF REQUIRED e.g. Hostesses/hosts				DATES REQUIRED	HOURS TO BE WORKED EACH DAY
Additional Information							

Surname: