



Cooks for Hire

MANAGEMENT INC.

Client Application Form

COMPANY INFORMATION

Company Name: _____ Type of Establishment: _____
 Address: _____ City: _____
 Province: _____ Postal Code: _____
 Contact Name: _____ Job Title: _____
 Telephone Number: _____ Extension: _____
 Other Number: _____ Extension: _____
 E-mail Address: _____

SERVICE REQUIRED

<i>Quantity</i>	<u>Position</u>		<u>Date</u>			<u>Time</u>	
	<i>Type</i>		<i>Month</i>	<i>Date</i>	<i>Year</i>	<i>Start</i>	<i>End</i>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

OTHER INFORMATION

May we advertise your establishment on our website? (free of charge) Yes No
 How did you hear about our service? _____
 Preferred method of communication? _____

Any other questions or comments, feel free to write in the space below:

Please fax your completed sheets to: 604-618-3684 or call to confirm shift availability.