



IATSE LOCAL #69
PERSONAL INFORMATION APPLICATION
PRINT

NAME

FIRST MI LAST

DOB _____ TODAYS DATE _____

ADDRESS _____

CITY STATE ZIP

PHONE SS#

EMAIL _____

EMERGENCY CONTACT _____

RELATION _____

PHONE _____

REFERRED BY _____

DO YOU HAVE TRANSPRTATION? YES NO

LIST INDUSTRY SKILLS AND WORK HISTORY:

BACKLINE _____

CARPENTRY _____

LIGHTING

AUDIO

FOLLOWSPOT

RIGGING

CONSOLE OPERATOR

FLYRAIL

LIST VENUES WORKED

REFERENCES

I HAVE RECEIVED A COPY OF THE MEMPHIS JOB REFERRAL
PROCEDURE

SIGNATURE

DATE
