



SLIDEWATERS USE ONLY						
Date/time:	Confirmed:					
Desired Position:						
Applicant Group:	Commute:					
Offer:						

PO BOX 1601 · Chelan, WA 98816 · 509-682-5751 · info@slidewaters.com

TEAM MEMBER APPLICATION

PERSONAL INFORMATION (please write legibly)											
Full Name:						Name P	refe	rence:			
Email:		<u>'</u>				DOB: Genc (option					
All interviews will be sc	heduled via	. email. Please	provide valid	email addre	ess a	nd check fo	r cor	respondence	e from: in	nfo@slidew	aters.com
Phone Number: ()		○ Pers	sonal Cell	○ Landlir	ne C) Parent (Cell	Transportati	on to wor	rk:	
Permanent Address (Street/City/St/Zip): Summer Residence City						nce City:					
		AVA	ILABILITY	' INFOR	MA	TION					
Date available to start	full time:		Last day a	available:	•			view Date P			
Desired hours per week:	○ less th	an 20 ○20-	-30 \(\to 40	2nd sum	nmer	job: Yes	or I	No If yes,	where:		
Current school (if applicable	e):			School a	itten	nding next	year:				
Major summer scheduling challenges (examples; 2nd job, summer school, unavailable same day(s) every week, vacations over 7 days, other)											
Position Interest (rank al	that apply)	Pool/F	acility Ope	erations		Food &	Bev	verage Te	eam	Grou	nds Team
Retail Team	Slidewater	rs Guard Te	am Su	ırf Team	O	ther:					
	F	RELAVENT	QUALIFIC	CATION	1 S/	EXPERIE	NC	E			
Training/Certifications/Skills:											
Major Studies:	ajor Studies: Awards/Honors:										
Reoccurring Responsibility	ties (ex: care	for others or a	nimals, chore	es, etc):							
Sports/Activities:											
Former Employers	Supervisor	Name & Phoi	ne D	ates Empl	oye	d	Ро	sition & W	age	Reason f	for leaving
How did you hear about this opportunity Referred by: Former Team Member(s):											
How did you hear about this c to work at Slidewaters? (check		Referred by		nstagram	<u> </u>	mer Team		per(s):	Epian J	ls/Family	Other
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PROFESSIONAL and/or PERSONAL REFERENCES (non-family)					
Name:	Phone:	Occupation:	Years Acquainted:		
Name:	Phone:	Occupation:	Years Acquainted:		
Name:	Phone:	Occupation:	Years Acquainted:		
SLIDEWATERS. LLC APPLICANT AGREEMENT					

I certify that all the information provided on this application is true and accurate. My signature below also signifies that I am eligible to work in the United States, I am able to perform the essential duties of the position I am applying for, and that I understand I am applying for a seasonal job and if hired would be an "at will" employee in accordance with Washington State Law. I also agree-if chosen for employment-to comply with all current and future Slidewaters' policies, rules & regulations.

Please read the following & sign below to signify an understanding & agreement of the statements.

- Slidewaters is a drug-free company and all Team Members agree to submit to pre-employment and random drug testing while employed by Slidewaters.
- The position I am applying for is a seasonal position, and as such, my employment, if hired, would end with the season. In addition, I understand all Slidewaters employees are "at will" employees and are not guaranteed employment for the entire operational season.
- I do hereby release and hold harmless Slidewaters, LLC from any and all claims whatsoever, including but not limited to, personal injury arising out of or relating to any non-work hour or non-work related recreational activity provided by Slidewaters, LLC.
- I provide permission for Slidewaters, LLC to seek any necessary medical treatment I may need due to a work related
- I release permissions of my likeness in the form of video, pictures or voice recordings to Slidewaters, LLC for use in future advertising —without additional compensation.
- If hired I will be expected to behave in the best interest of Slidewaters, LLC; always acting with professionalism, courtesy and respect for other people. I will be held accountable to follow and enforce all Slidewaters, LLC policies, rules, regulations and operating procedures.

APPLICANT SIGNATURE	DATE	PARENT/GUARDIAN SIGNATURE	DATE
		(REQUIRED FOR APPLICANTS UNDER 18)	