

Cedar Falls Motorsports Park

Date _____
Name _____ Social Security # _____
Address _____ City _____ State _____ Zip _____
Home Phone # _____ Cell Phone # _____
Work Phone # _____ Can we call you at work? Y N
E-mail Address _____

Due to certain Insurance laws you must be a minimum of 16 yrs. old to work in restricted areas.

Driver's License # _____ Are you at least 16 yrs. Old? Y N If No, when? _____
Emergency Contact _____ Relationship _____
Address _____ Phone # _____
How far from the track do you live? _____ miles. How did you hear about applying? _____
Have you previously worked at CFMP? Y N If Yes, list positions worked _____

Position(s) applying for _____

Time available for work or interested in working (circle all that apply)

ANY FRIDAY EVENING SATURDAY SUNDAY SPECIAL EVENTS

Are you currently employed? Y N If yes, describe _____

Previous employer _____ Phone # _____

What previous experience or training would qualify you to work at CFMP? _____

Have you ever Drag raced? Y N Where? _____

Have you ever attended a drag race? Y N Where? _____

Why do you want to work at CFMP? _____

Interviewed by: _____ Date _____

Position(s) recommended _____

Hired Y N Reason _____

Wage: _____ Date Started _____
Position _____ Shirt Size _____