Date Received_____ Date Processed_____ Corporate approval_____

NEW HIRE INFORMATION

Club Location_____

Effective date of action_____

NAME:_____ SSN:_____

ADDRESS:_____

_____

PHONE:_____ DATE OF BIRTH:_____

DATE OF HIRE/RE-HIRE:_____

PERCENTAGE:_____

POSITION-(CHECK ONE): MANAGER___ CERTIFIED TRAINER____ OTHER:____ (Can only be authorized by corporate office)

REQUIRED DOCUMENTS: Mangers please initial after all documents are collected and properly filled out.

DRIVERS LICENSE____

SOCIAL SECRUITY CARD_____

INDEPENDENT CONTRACT AGGREEMENT____

SEXUAL HARRASMENT FORM ____

TAX FORM ____

DIRECT DEPOSIT INFORMATION (VOIDED CHECK)____

PERSONAL TRAINING CERTIFICATE_____

CPR CERTIFICATE- Online CPR certifications are NOT accepted._____ " American Red Cross OR American Heart Association!!!

PROOF OF INSURANCE- Please list Bailey's Gym Inc, and SweatPT LLC, as additionally insured. Please only label directly as you see on this form and include location address. The **MINIMUM** amount of coverage needed is $1,000,000.00. _____

Suggested vendors for these documents can be found at www.sweatptdocs.com. ALL CERTIFICATIONS MUST BE KEPT CURRENT AT ALL TIMES.

FAX entire completed packet to corporate office 904-685-5876 for approval.

I UNDERSTAND THAT THIS FORM IS A REQUEST FOR NEW EMPLOYMENT OR SUB CONTRACT AGREEMENT AND IT MUST BE APPROVED BY CORPORATE BEFORE THE EMPLOYEE OR SUB CONTRACTOR CAN BEGIN WORKING.

EMPLOYEE/SUB-CONTRACTOR SIGNATURE: _____ MANAGER SIGNATURE:_____