



## MEMBERSHIP APPLICATION 2018

First name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode and city: \_\_\_\_\_

Phone number: \_\_\_\_\_

Cell phone nr: \_\_\_\_\_

E-mail: \_\_\_\_\_

Personal number: \_\_\_\_\_

Link to your FB-page: \_\_\_\_\_

### BANKING CREDENTIALS

Bank: \_\_\_\_\_

Clearing nr: \_\_\_\_\_

Account nr: \_\_\_\_\_

### OTHER INFORMATION

Hight: \_\_\_\_\_

Shirt size: \_\_\_\_\_

Food diet: \_\_\_\_\_

Name any wishes of assignments such as Security, hump, water or Backstage:

Medical information:

*Allergies, illnesses, cramps, etc. Anything that may be of interest for the employer*

## EMERGENCY CONTACTS

Contact 1		Contact 2	
Relation		Relation	
Name		Name	
Surname		Surname	
Address		Address	
Postcode & city		Postcode & city	
Phone nr 1		Phone nr 1	
Phone nr 2		Phone nr 2	
Cell phone nr		Cell phone nr	

*By filling out this form and sending it to [info@eventcrew.se](mailto:info@eventcrew.se), I agree to Eventcrew's statutes and storage of my personal information according to PUL. I also give my consent to Eventcrew posting images of events where I might be visible.*

*An assured spot at the festival of the year mentioned above is given first when all documents have been signed and recieved by the board of the association.*