

Temp Staff Order Form

(e.g. for product demonstrators, hostesses/hosts, receptionists, waitresses/waiters, bartenders, sales assistants etc)

YOUR DETAILS (please complete the yellow shaded areas in capitals)

NAME OF PERSON	Forename:	Surname:
COMPANY DETAILS	Company Name:	
	Telephone Number:	
		Email Address:

STAFFING REQUIREMENTS (please complete the yellow shaded areas in capitals)

NUMBER OF STAFF REQUIRED	TYPE OF STAFF REQUIRED e.g. hostesses/hosts	DATES REQUIRED	HOURS TO BE WORKED EACH DAY

Additional Information:

UPON COMPLETION PLEASE EMAIL TO INFO@BONDASSOCIATES.CO.UK. WE WILL THEN REPLY WITH A QUOTATION BASED ON THE ABOVE INFORMATION WITHIN 24 HOURS