

Temp Staff Order Form

(e.g. hostesses/hosts, waitresses/waiters, baristas/bartenders, promotional staff etc)



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

NAME OF PERSON	Forename:		Surname:	
	COMPANY DETAILS			
Company Name:				
1st Line of Address:				
2nd Line:				
3rd line:				
City:		Postcode/Zip:		Country:
Telephone Number:			Fax 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 SCAN AND EMAIL TO INFO@BONDASSOCIATES.CO.UK. WE WILL THEN REPLY WITH A QUOTATION BASED ON THE ABOVE INFORMATION WITHIN 24 HOURS