



For Official Use Only
 Date Received: _____, 20__
 Reviewed by: _____
 Comments: _____

MEMBERSHIP APPLICATION

Westcliffe Paranormalists provides equal membership opportunity to all qualified persons, and does not unlawfully discriminate against any person on the basis of race, color, creed, religion, sex, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Please -

- Complete all items on the application, even if the information is included on your resume or other document submitted by you.
- Sign and date your application.
- Specify the exact title of the position in which you are interested.
- Type or print all requested information.
- If necessary, attach additional 8 1/2 " x 11" sheets of paper to this application.
- Submit your application.

Position Applying For: _____

Personal Information

1. Name (Last, First Middle)	3. Date of Birth	6. Driver's License (State/No.)
2. Address (Street)	4. Telephone Number () -	7. Alternate Telephone () -
Address (City, State, Zip Code)	5. Email Address	

General Information

Are you willing to volunteer for the Westcliffe Paranormalists.? Yes No

Have you ever applied to or been a member of Westcliffe Paranormalists Yes No before? If so, when?

Are any of your relatives currently members of Westcliffe Paranormalists? Yes No If so, please list name and department, if applicable.

Have you ever been convicted of a felony? Yes No If yes, please explain.

Membership Request

How many hours per month are you available?	Do you consent to a background check? <input type="checkbox"/> Yes <input type="checkbox"/> No
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What is the earliest date you can begin volunteering?

How did you hear about this position?

Recruiter Internet Job Posting Newspaper Classified Company Website Other _____

References

Name	Company	Title	Contact Information

Signature / Certification

I certify that the facts set forth in this application are true, complete, and correct to the best of my knowledge. I understand that any misrepresentations, falsifications, or omissions on this application can be grounds for rejection of my application or, if I am offered membership by this company, for my immediate termination of membership. I authorize Westcliffe Paranormalists to make any necessary inquiries and investigations into my education, military, criminal, or employment history. I further authorize, unless otherwise indicated on this application, the release of my information to Westcliffe Paranormalists] by any of the schools, services, or employers listed on this application. I understand that my personal information will remain confidential, and will not be shared with anyone outside the company, and that my information will only be used to perform reference and or background checks.

Signature:

Date: