

# EMPLOYEE Lake Host Information - NH LAKES 2016 Lake Host Program™

Lake Host Employee Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Permanent Mailing Address: \_\_\_\_\_  
(Mailbox address or P.O. Box) (City) (State) (Zip Code)

*If P.O. Box provided above, provide your Physical Street Address:*

\_\_\_\_\_  
(Physical street address) (City) (State) (Zip Code)

Email address: \_\_\_\_\_ Phone: H: \_\_\_\_\_ C: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION:

Name Parent/Guardian (if Lake Host under 18): \_\_\_\_\_  
(First) (Last) (Relationship)

Guardian phone #: H: \_\_\_\_\_ C: \_\_\_\_\_ W: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_  
(First) (Last) (Relationship)

Emergency Contact phone #: H: \_\_\_\_\_ C: \_\_\_\_\_ W: \_\_\_\_\_

## GROUPS & RATES: Indicate what organization(s) you will be working with.

Organization Name: \_\_\_\_\_

o Position(s) – select all that apply:

- Lake Host (ramp work) - Specify agreed upon hourly rate: \$ \_\_\_\_\_ per hour
- Managing Lake Host (administrative work) - Specify agreed upon hourly rate: \$ \_\_\_\_\_ per hour

Organization Name: \_\_\_\_\_

o Position(s) – select all that apply:

- Lake Host (ramp work) - Specify agreed upon hourly rate: \$ \_\_\_\_\_ per hour
- Managing Lake Host (administrative work) - Specify agreed upon hourly rate: \$ \_\_\_\_\_ per hour

## PAYMENT OPTION: Indicate how you would like to receive your bi-weekly payment.

**Regular check via US Mail** – specify paycheck mailing address if not same as permanent mailing address:

\_\_\_\_\_  
Paycheck address (Mailbox address or P.O. Box) (City) (State) (Zip Code)

**Direct Deposit:** I hereby authorize my employer, NH LAKES Association, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account listed below.

Name of bank, savings & loan, credit union: \_\_\_\_\_

Type of Account (specify – no split deposits available):  Checking  Savings

Routing Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

I wish to deposit the following into this account (select one only)

\$ \_\_\_\_\_ OR \_\_\_\_\_ % Net pay amount OR \_\_\_\_\_ Entire Net Amount

**I have provided: A voided check & my email address for payment notifications (up above on this form).**

## Training Certification: By signing this form, you are stating that you:

1. Attended/scheduled to attend the following 2016 Lake Host Training Session (check off all that apply)

NH LAKES Training – specify date: \_\_\_\_\_  Local Training - specify date: \_\_\_\_\_

2. Reviewed the 2016 Lake Host or Point Person/Managing Lake Host job description.

3. Watched/will watch the videos (shown in training sessions & also posted at [www.nhlakes.org/lake-host](http://www.nhlakes.org/lake-host)):

- Aquatic Invasive Species in New Hampshire's Waters: The past, present & future?
- Protect Our Lakes: How to Lake Host

4. Reviewed/will review the 2016 Lake Host Manual. \_\_\_\_\_

(Lake Host Signature)

(Date)