

Contractor / Staff Application

Contact Information Please Print			ID#:			
Name (last) (first)			Birth date		Age	
Home Address	City & State				Zip	
()	()		. ()		
Home Phone	Cell Phone		Other	Phone		
E-Mail Address		Text / Alt E	-Mail Address			
Emergency Information						
			()			
Emergency Contact			Emergency Pho	ne/cell		
Medical Insurance Coverage & Policy	/ or /SS#		Medications or I	Medical Co	onditions/ Allergies	
I certify that information conto be grounds for not hiring me o authorize the verification of ar	or for immediate contract ten	mination at ar				
Signature		Date				
ſ	CONFIDENTIAL ::::: Adm	ninistrative I	nformatior	1		
	To be completed by Studio T Urk	oan Dance Aca	idemy Director			
COMPLETE W9	COMPENSATION METH	OD:	СНК	AUT(D DEPOSIT	
RATE OF PAY:	COMISSION/BO	NUS TERMS:				
TEACHING LEVEL:	STUDY TRIP ELIGIBLE:		DIR. AUTH	[.:		



Are you eligible to work in the United States?	Yes	_No
If you are under age 18, do you have an work permit?	Yes	_No
Are you eligible to work with children?	Yes	No
Have you been convicted of or pleaded no contest to a felony?	Yes	No
If yes, please explain:		

Position / Availability:

List Preferred Instruction Type/Classes you want to teach: _____

Days/Hours Available to work:

 Monday 			
 Tuesday 			
What date are you available to Styles you are trained to teach: Training you've received in the s			
Education: Name and Address Of School –			
Degree/Diploma: Yes No	Still Attending	If yes, Graduation Date:	
Skills and Qualifications: License	s, Awards:		



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Employment History: Present Or Last Position(s):

Employer:				
Address:				
Supervisor:		Phone:		
Position Title:		From:	To:	
Responsibilities:				
Salary: Reas	on for Leaving:			
May We Contact Your Present Employer?	Yes	_ No		
Employer:				
Address:				
Supervisor:		Phone:		
Position Title:		From:	To:	
Responsibilities:				
Salary: Reas	on for Leaving:			
May We Contact Your Present Employer?	Yes	_ No		
Employer:				
Address:				
Supervisor:		Phone:		
Position Title:		From:	To:	
Responsibilities:				
May We Contact Your Present Employer?	Yes	_ No		

References: Name / Title / Address / Phone / E-Mail

1.	
2.	
3.	

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Contractor / Staff Policies and Procedures

- 1. THIS IS A DRUG, ALCOHOL, INAPPROPRIATE MUSIC, AND FOUL LANGUAGE-FREE Studio. No exceptions!
- 2. To protect the uniqueness of Studio T, please refrain from duplicating choreography, material, and/or music you create for Studio T elsewhere.
- 3. You are a leader and an icon in your field of the art, please conduct yourself appropriately. Be sure that your music, style, class content, your outward look, and terminology matches the era we are in or trendsetting for the era to come.
- 4. All instructors must log-in 15 minutes before teaching class with your membership card. If you do not log in we will not be able to track your hours for compensation.
- 5. Be prepared to start your class 5 minutes prior to class starting. Be prepared to end your class 5 minutes before class is scheduled to end.
- 6. Respect the instructor teaching before you by entering the room quietly
- 7. You have the right to restrict entry to your class while instructing, as no parents or spectators are allowed in classes while class is in session.
- 8. You have the right to determine the number of dancers allowed in their classes. Class size is restricted to room capacity. You may put a limit on attendance.
- 9. DO NOT ENGAGE in inappropriate relationships, gestures, jokes, inuindos, touching, taunting, or any behaviors of the like with students or parents. NO EXCEPTIONS! You are a leader, and to be a positive influence on our students in everyway.
- 10. DO NOT ENGAGE phone calls or text messages while in class (for obvious reasons).
- 11. CAMERAS, VIDEO AND AUDIO RECORDERS ARE RESTRICTED AT ALL TIMES.
- 12. THE WRITING OF DANCE NOTES (DANCE NOTATION OF ANY KIND) OF ANY CLASS IS PROHIBITED by students, except when you, the teacher, has given permission and notified the studio.
- 13. DO NOT LEAVE Music, dance bags, IPODs, or any other personal item in the dance rooms, lobby, or restrooms. Studio T is not liable for lost, stolen, or damaged personal items.
- 14. Report all accidents and injuries to Studio T director (or at facility front desk) immediately. All accidents, injuries, and incidences with parents or other staff/contractors must have a written report completed the same day and submitted to the director.
- 15. All contractors must submit a timesheet or invoice on the 5th and 20th of each month. These must be accompanied by attendance sheets. We will during these periods only. If you miss a deadline, your

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check will be processed the following pay period. Allow a maximum of 3 days for processing (if due date falls on a weekend).

- 16. If you are unable to teach your class, you must give the director advanced notice, AND secure a knowledgeable substitute teacher for your class.
- 17. We require a two week notice prior to termination of your teaching contract.
- 18. The contractor must assist in the training of a replacement contractor for any and all classes they teach. A training session should be no shorter than two weeks, and no longer than two weeks.

By signing below, I/we agree to the rules and regulations. If you are signing for your minor child you agree to discuss these rules with your child and ensure he/she understands them and remains compliant with the rules at all time. I further acknowledge that refunds are not provided for any reason. I will hold harmless Studio T Urban Dance Academy, A3 Media & Entertainment Group, Inc. and their owners, staff, directors and any affiliates members and volunteers from any and all liability.

I understand that there are risks of physical injury (including but not limited to cuts, sprains, broken bones and/or catastrophic injury) associated with, arising out of participation. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all rights and/or causes of action of any kind, including any and all claims of negligence, arising as a result of such activity from which any liability could accrue to Studio T Urban Dance Academy, A3 Media & Entertainment Group, Inc., its officers, owners, agents, employees, instructors, volunteers, subsidiaries, parent corporations and all affiliated entities.

I hereby agree to release Studio T Urban Dance Academy, A3 Media & Entertainment Group, Inc., all owners, and all affiliates participating in this class harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in this class on behalf of the participant.

I am aware that this is a release of liability and acknowledgment of my voluntary and knowing assumption of risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

In the event of injury to my/our child, I/we hereby grant authority to a qualified physician to render such medical treatment as said physician deems necessary under the circumstances.

I/we give consent to have my contact information along with my name, first name only to be used on Studio T Urban Dance Academy marketing material or website.

(I agree) or my child has my permission to attend/participate in the dance class. I have completely read and understand the medical/liability release, safety regulations and fully understand the financial commitment. I hereby authorize Studio T Urban Dance Academy, A3 Media & Entertainment Group, Inc. Or a director or their agent to act in my/my child's behalf to provide medical treatment. I further release the Studio T Urban Dance Academy, A3 Media & Entertainment Group, Inc. of all liabilities associated with my/my child's attendance or participation in any classes or events.

Print Full Name

Date

Instructor/Employee Signature

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Confidential Information Agreement

In consideration of being contracted/employed by A3 Media & Entertainment Group, Inc. DBA Studio T Urban Dance Academy, the undersigned hereby agrees and acknowledges:

- 1. That during the course of contract/my employ there may be disclosed to me certain trade secrets of Studio T Urban Dance Academy; said trade secrets consisting of:
 - a. Technical information: Methods, processes, formulae, compositions, inventions, machines, computer programs and research projects.
 - b. Business information: Customer lists; pricing data; sources of supply; and marketing, production, or merchandising systems or plans.
- 2. I shall not during, or at any time after the termination of my contract with Studio T Urban Dance Academy, use for myself or others, or disclose or divulge to others any trade secrets, confidential information, or any other data of Studio T in violation of this agreement.
- 3. That upon the termination of my contract from Studio T Urban Dance Academy:
 - a. I shall return to the Studio T Urban Dance Academy all documents relating to the company, including but not necessarily limited to: drawings, blueprints, reports, manuals, correspondence, customer lists, computer programs, and all other materials and all copies thereof relating in any way to the Studio T's business, or in any way obtained by me during the course of my employ/contract. I further agree that I shall not retain any copies of the foregoing.
 - b. Studio T may notify any future or prospective employer of the existence of this agreement.
 - c. This agreement shall be binding upon me and my personal representatives and successors in interest, and shall insure to the benefit of Studio T, its successors and assigns.
 - d. The unenforceability of any provision to this agreement shall not impair or affect any other provision.
 - e. In the event of any breach of this agreement, Studio T Urban Dance Academy shall have full rights to injunctive relief, in addition to any other existing rights, without requirement of posting bond.
 - f. If a contractor is terminated before the end of their contract date, due to negligence, class abandonment, or irresponsible practices and behaviors which leads to loss of income for Studio T, the contractor is responsible for any and all expenses incurred to Studio T Urban Dance Academy.
- 4. Covenant not to compete: General form of provision in employment contract restricting a discharged instructor's ability to compete with Studio T Urban Dance Academy for a reasonable period of time.
 - a. If such employment is terminated for any cause, employee shall not, for a period of 1 years after leaving as a contractor of Studio T Urban Dance Academy, engage directly or indirectly, either personally or as an employee, associate partner, partner, manager, agent, or otherwise, or by means of any corporate or other device, in the Urban Dance, Dance Studio, Performing Arts, Dance Teacher, Competition Dance business within 50 miles of Sacramento, CA.
 - b. Nor shall employee for such period and in such localities solicit orders, directly or indirectly, from any customers of employer, or from any customers of its successor, for such products as are sold by Studio T or its successor, either for himself or herself or as an employee of any person, firm, or corporation.

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- 5. CONTRACTOR/EMPLOYEE CONFIDENTIALITY AGREEMENT: provision of contract restricting contractor/employee from divulging trade secrets of Studio T:
 - a. Contractor/Employee agrees that any and all knowledge or information that may be obtained in the course of the contract/employment with respect to the conduct and details of the business and with respect to the secret processes, formulas, machinery, etc. used by the employer in developing its products will be forever held inviolate and be concealed from any competitor and all other persons and that he or she will not engage as employer, employee, principal, agent, or otherwise, directly or indirectly, at any time in a similar business, and that he or she will not impart the knowledge acquired to anybody and that should he or she at any time leave the contract/employ of the employer
 - b. He or she agrees not to enter into the employ or service or otherwise act in aid of the business of any rival company or concern or individual engaged in the same or in similar lines of business. If he or she does so in violation the employer shall be entitled to an injunction by any competent court of equity enjoining and restraining him [her] and each and every other person concerned from continuance of employment, services or other acts in aid of the business of the rival company or concern. Nothing shall prevent him [her], upon the termination of the contract/employment, in engaging in any occupation in which the processes, formulas, and other secrets of the employer will not be directly or indirectly involved.

Print Full Name

Date

Instructor/Employee Signature

ntemai	Revenue Service						
page 2.	Name (as shown c	on your income tax return)					
uo	Business name, if	different from above					
Print or type Instructions	Check appropriate	box: Individual/ Sole proprietor	Corporation	Partnership	Other I		Exempt from backup withholding
Print o	Address (number,	street, and apt. or suite no.)				Requester's name and a	ddress (optional)
P Specific	City, state, and ZII	P code					
See S	List account numb	per(s) here (optional)					
Part		er Identification Nur	nber (TIN)				

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose

Social security number							
		+	-	-			
			or				
Empl	oyer	identif	icati	on n	umb	er	
	1	1				I	1

Part II Certification

number to enter.

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and

- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign	Signature of	
Here	U.S. person 🕨	Date 🕨

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

• An individual who is a citizen or resident of the United States,

• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,