

Employers registration form

The information you provide will enable us to match the best person for the job from our extensive database of workers to your specific requirements. Please complete the registration form below. Your details will be treated with absolute confidentiality.

Registered Company Name

Trading Name

Email Address

Postal Address

Street Address

Telephone

Fax

After Hours

Mobile

Contact Name

Phone Number

Description of Role

Type of Work/Task Description

Specific Industry Licence or Certificates

Skills/ Experience Required

Tools Required

Location of Worksite

Duration of Job if applicable

I have read and agree to the Terms of Business Y / N

Signed:

Dated:

Our terms of Business are available on our website

<http://www.c2cworkforce.co.nz/media/media/PDF/Terms-of-Business-2017.pdf>