

Eastern Shore EMS Council

P.O. Box 235
Eastville, VA 23347

CHECK REQUEST & PART-TIME, TEMPORARY EMPLOYMENT CONTRACTUAL AGREEMENT

Date _____

MAKE CHECK PAYABLE TO:

Name

SS#

Address

City State Zip

Work Phone Home Phone

This agreement is entered into this _____ day of _____ by and between Eastern Shore EMS Council hereinafter, and _____ hereinafter called the Contractor.

Whereas the Eastern Shore EMS Council has need for the professional services of a person with the particular training, ability, knowledge, and experience possessed by the Contractor, now therefore, in consideration of sum of \$ _____ to be paid to the Contractor by the Eastern Shore EMS Council, the Contractor agrees to perform during the period _____ the following personal and/or professional services:

- _____ Lecturer
- _____ Workshop Assistant
- _____ Patient/Victim
- _____ _____

In performing the above services it is understood and agreed that:

1. The Contractor will not be eligible for workman's compensation, or unemployment insurance benefits from this contract payment, except as a self-employed individual.
2. The Contractor will hold harmless the Eastern Shore EMS Council for any liability resulting from injury or illness incurred as a result of performing the above specified services.
3. The Eastern Shore EMS Council will report the amount of all payments applicable, including any expenses, in accordance with federal Internal Revenue Service rules.

Contractor

Course Coordinator

Date

President