### **APPLICATION FOR EMPLOYMENT**

TRI-TOWNSHIP PARK DISTRICT 410 Wickliffe, TROY, IL 62294 618-667-6887 parkoffice@tritownshippark.org

First Name:	Age:	Work permit required:	
Last Name:	Date of Birth:	Work permit attached	
Address:			
City:			
	Additional Contact Phone #:		
Email address:			
	Emergency Phone #		
Father's Name:			
required to have a work permit to act as a referee/concalso acknowledge if the above child is under the age of a during the games in which he/she is officiating.  Waiver: As the parent and/or legal guardian of the child child(ren) to participate in this program. I recognize and program. I agree to assume the full risk of any injury, in may sustain as a result of participating in any and all act capable of participating in the above program and that reinfirmities that would restrict full participation in these a indemnity and hold harmless the Tri-Township Park Distand all claims resulting from injuries, including death, dawith, or in any way associated with activities of this program.	It acting as a Referee/Um d(ren) named above, I here d acknowledge that there a cluding death, damage and ivities connected with this my child(ren) is/are health activities, except as listed unit crict, its Board of Commission	by give my full consent and approval for my are certain risks involved in participating in this d/or loss regardless of severity which my child(ren) program. I hereby certify that my child(ren) is/are y and has no physical or mental disabilities or under medical information. I fully agree to oners, agents, servants, and employees from any	
Parent Signature:	Date:		

This form must be completed in its entirety along with both tax forms and returned to the Park Office before there will any compensation paid to an individual. If a participant is under the age of 16, a work permit must also be presented at this time.

# Form W-4

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.

OMB No. 1545-0074

Department of the Tr Internal Revenue Ser	rtment of the Treasury al Revenue Service  Service  Service  Give Form W-4 to your employer.  Your withholding is subject to review by the IRS.		the IDS	2022				
Step 1:	_	irst name and middle initial	Last name	ille Ino.	(b) S	ocial security number		
Enter Personal Information	Address  City or town, state, and ZIP code			card? credit i SSA at	▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.			
	(c)							
Complete Ste	ps 2- on fro	4 ONLY if they apply to yo m withholding, when to use	u; otherwise, skip to Step 5. See pa the estimator at www.irs.gov/W4App	age 2 for more information, and privacy.	on on e	ach step, who can		
Step 2: Multiple Job or Spouse Works	98	Do only one of the following (a) Use the estimator at which withholding; or (c) If there are only two job option is accurate for jot TIP: To be accurate, subm	(1) hold more than one job at a time, on the count of withholding depends on income.  If a count of withholding depends on income.  If a country is a country is a country is a country in the results of the country is a country in the country is a country in the country is a country in the country in the country is a country in the country is a country in the country is a country in the country in the country is a country in the country in the country in the country is a country in the country in	e withholding for this step esult in Step 4(c) below the the same on Form W-4 to tax than necessary may	nese jolo o (and a for roug for the o be with	os. Steps 3–4); or phly accurate other job. This		
Complete Ste be most accur	ps 3- ate if	4(b) on Form W-4 for only	ONE of these jobs. Leave those step on the Form W-4 for the highest payir	ps blank for the other job	os. (You	ur withholding will		
Step 3: Claim Dependents	<b>.</b>	Multiply the number of o	\$200,000 or less (\$400,000 or less if qualifying children under age 17 by \$2,000 other dependents by \$500	000 ► <u>\$</u> . ► <u>\$</u>	-			
Step 4 (optional): Other Adjustments	3	(a) Other income (not freexpect this year that we This may include interections. If you expend want to reduce your withe result here.	rom jobs). If you want tax withhele on't have withhelding, enter the amount of the amo	unt of other income here  standard deduction and heet on page 3 and ente	4(a)	\$		
Step 5: Sign Here			that this certificate, to the best of my know orm is not valid unless you sign it.)	wledge and belief, is true, c		and complete.		
Employers Only	Empl	oyer's name and address		First date of employment	Employ number	er identification (EIN)		
For Drivony Ast	and r	Innormarie Doduction Act Nati						

## Illinois Withholding Allowance Worksheet

### **General Information**

Complete this worksheet to figure your total withholding allowances.

Everyone must complete Step 1.

Complete Step 2 if

- you (or your spouse) are age 65 or older or legally blind, or
- you wrote an amount on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4.

If you have more than one job or your spouse works, you should figure the total number of allowances you are entitled to claim. Your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

You may reduce the number of allowances or request that your employer withhold an additional amount from your pay, which may help avoid having too little tax withheld.

Step 1: Figure your basic personal allowances (including allowances for dependents)						
Check all that apply:  ☐ No one else can claim me as a dependent.						
<ul> <li>I can claim my spouse as a dependent.</li> <li>Write the total number of boxes you checked.</li> <li>Write the number of dependents (other than you or your spous</li> </ul>	te) you will claim on your tax return.					
3 Add Lines 1 and 2. Write the result. This is the total number of you are entitled.	basic personal allowances to which					
4 If you want to have additional Illinois Income Tax withheld from number of basic personal allowances or have an additional am of basic personal allowances you elect to claim on Line 4 and of	your pay, you may reduce the					
Step 2: Figure your additional allowances	5					
Check all that apply:						
☐ I am 65 or older. ☐ I am legally	blind.					
☐ My spouse is 65 or older. ☐ My spouse is						
<ul> <li>Write the total number of boxes you checked.</li> <li>Write any amount that you reported on Line 4 of the Dadwetter</li> </ul>	5					
Write any amount that you reported on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4.						
Divide Line 6 by 1,000. Round to the nearest whole number. Write the result on Line 7.						
8 Add Lines 5 and 7. Write the result. This is the total number of a	additional allowances to which					
you are <b>entitled.</b>	you are entitled.					
9 If you want to have additional Illinois Income Tax withheld from number of additional allowances or have an additional amount of additional allowances.	your pay, you may reduce the					
of additional allowances you elect to claim on Line 9 and on Fo	rm IL-W-4, Line 2.					
If you have non-wage income and you expect to owe Illinois Income Tax on that income, you may choose to have an additional amount withheld from your pay. On Line 3 of Form IL-W-4, write the additional amount you want your employer to withhold.  Cut here and give the certificate to your employer. Keep the top portion for your records.  Illinois Department of Revenue IL-W-4 Employee's Illinois Withholding Allowance Certificate  1 Write the total number of basic allowances that you are claiming (Step 1, Line 4, of the worksheet).  2 Write the total number of additional allowances that						
Name Street address	you are claiming (Step 2, Line 9, of the worksheet). 2  3 Write the additional amount you want withheld (deducted) from each pay.					
	I certify that I am entitled to the number of withholding allowances claimed on					
City State ZIP  Check the box if you are exempt from federal and Illinois	this certificate.					
Income Tax withholding and sign and date the certificate.	Your signature Date					
This form is authorized under the Illinois income Tax Act. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.	Employer: Keep this certificate with your records. If you have referred the employee's federal certificate to the IRS and the IRS has notified you to disregard it, you may also be required to disregard this certificate. Even if you are not required to refer the employee's federal certificate to the IRS, you still may be required to refer this certificate to the Illinois Department of Revenue for inspection. See Illinois Income Tax Regulations 86 III. Adm. Code 100.7110.					