



Tawas Point Lighthouse Keeper Program Application 2010



Please list the names of the applicants. All Lighthouse Keepers must be 18 years of age or older. Applicants must reside on site as keepers for the entire length of the stay. Singles are welcome to apply.

Name (s) _____
Address _____
City/State/Zip _____
Phone Number _____
E-Mail Address _____

If individual applicants wish to work together, each person or couple must submit a separate application, complete with letters and deposit. Please list below the names of other applicants with whom you would like to be scheduled.

NEW KEEPERS

Both sides of the application must be filled out completely, signed and returned as soon as possible and accompanied by the items listed below.

1. A letter of application stating why you want to be a Keeper and any experiences working with the public.
2. One personal letter of reference.
3. A \$25.00 non-refundable deposit per person.

(Please make checks payable to: "State of Michigan")

*Upon receipt of your application a follow-up telephone discussion will follow. Once your visit has been scheduled, the final fee (\$225.00 per person) is due and a packet will be sent out to you with additional information regarding your visit only after the final payment has been received.

RETURNING KEEPERS

1. Completed application.
2. A \$25.00 non-refundable deposit per person.

*A telephone discussion to schedule your visit. The final fee (\$225.00) is due and a new packet will be sent out to you if necessary.

PROGRAM FEE

The Program fee will be due after scheduling of date. Refunds may be made 45 or more days prior, 50% refund 30 – 45 days prior and fee is non-refundable within a month of assigned date. The Tawas Point Keeper Program recommends you obtain travel insurance in case of an emergency, problems or other unforeseen circumstances. Rates are subject to change without prior notice.

2010 Schedule of Keeper Weeks

Indicate all weeks below that you are available to serve for the 2010 season. The more dates you are available, the greater your opportunity for selection.

- | | | |
|---------------------------------------------|----------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> MARCH 5-12 | <input type="checkbox"/> MARCH 12-19 | <input type="checkbox"/> MARCH 19-26 |
| <input type="checkbox"/> MARCH 26 – APRIL 2 | <input type="checkbox"/> APRIL 2-9 | <input type="checkbox"/> APRIL 9-16 |
| <input type="checkbox"/> APRIL 16-23 | <input type="checkbox"/> APRIL 23-30 | <input type="checkbox"/> APRIL 30-MAY 7 |
| <input type="checkbox"/> MAY 7-14 | <input type="checkbox"/> MAY 14-21 | <input type="checkbox"/> MAY 21-28 |
| <input type="checkbox"/> MAY 28 – JUNE 4 | <input type="checkbox"/> JUNE 4-12 | <input type="checkbox"/> JUNE 11-18 |
| <input type="checkbox"/> JUNE 18-25 | <input type="checkbox"/> JUNE 25 – JULY 2 | <input type="checkbox"/> JULY 2-9 |
| <input type="checkbox"/> JULY 9-16 | <input type="checkbox"/> JULY 16-23 | <input type="checkbox"/> JULY 23-30 |
| <input type="checkbox"/> JULY 30 – AUGUST 6 | <input type="checkbox"/> AUGUST 6-13 | <input type="checkbox"/> AUGUST 13-20 |
| <input type="checkbox"/> AUGUST 20-27 | <input type="checkbox"/> AUGUST 27 – SEPT. 3 | <input type="checkbox"/> SEPTEMBER 3-10 |
| <input type="checkbox"/> SEPTEMBER 10-17 | <input type="checkbox"/> SEPTEMBER 17-24 | <input type="checkbox"/> SEPT. 24 - OCTOBER 1 |
| <input type="checkbox"/> OCTOBER 1-8 | <input type="checkbox"/> OCTOBER 8-15 | <input type="checkbox"/> OCTOBER 15-22 |
| <input type="checkbox"/> OCTOBER 22-29 | <input type="checkbox"/> OCTOBER 29 – NOV. 5 | <input type="checkbox"/> NOVEMBER 5-12 |
| <input type="checkbox"/> NOVEMBER 12-19 | <input type="checkbox"/> NOVEMBER 19-26 | <input type="checkbox"/> NOV. 26 – DEC. 3 |
| <input type="checkbox"/> DECEMBER 3-10 | <input type="checkbox"/> DECEMBER 10-17 | <input type="checkbox"/> DECEMBER 17-24 |
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My signature below indicates that I have read and understand this entire application, including the explanation of Keepers' responsibilities and guidelines. I understand that there is no compensation for this position and also fully understand that, if accepted, I am agreeing to work at the lighthouse on the days and dates assigned to me. I understand that some aspects of the responsibilities, particularly the providing of tours, require good health and the ability to deal with the public and handle unexpected emergencies. I further understand that duties may include working in the Lighthouse Store and performing routine cleaning and maintenance. I agree to work all hours assigned to me if I am selected to be a resident Keeper.

Signature _____ Date _____

Signature _____ Date _____

Applications MUST be signed. Both applicants must sign if applying as a couple. Please mail to:

Tawas Point Keeper Program
686 Tawas Beach Road
East Tawas, MI 48730
(989) 362-5658