



Performer Work Identification Card Application

Jacksonville Sheriff's Office

Any person who wants to perform in an adult entertainment establishment licensed under Jacksonville Municipal Ordinance Code Chapter 150 and Chapter 151 must obtain a Performer Work Identification Card from the Jacksonville Sheriff's Office. **All performers will be required to obtain and maintain a Performer Work Identification Card on their person or within their custody and control at all times while at the adult entertainment establishment.**

No Performer Work Identification Card will be issued to individuals who have been convicted of any Human Trafficking or crimes related to such activity.

If any of these offenses are committed after a Performer Work Identification Card has been issued, your license will be suspended or revoked for the following periods after judicial review:

- Prostitution – 5 years
- Violent Felonies – 3 years
- Narcotics Sales/Trafficking – 3 years
- Lewd/Obscene Acts – 1 year
- Possession of Narcotics and/or Narcotic Paraphernalia – 1 year

If you are placed on probation for any of the listed offenses, you will not be eligible until your probationary period has concluded.

If you are currently on probation for any offense other than the offenses listed above, please submit a letter of approval from your probation officer authorizing your employment at the adult entertainment establishment.

A non-refundable fee of \$150.00 will be collected at the time this application is submitted. For your application to be processed, you must be in possession of a valid form of identification (a state issued driver's license or state issued identification card). In addition, you will be required to present your work permit authorizing you to work in the United States (if applicable). Application, supporting documentation, and payment must be submitted to the Police Memorial Building at 501 East Bay Street Jacksonville, Florida for processing.

A fee of \$50.00 will be assessed for lost Performer Work Identification Cards.

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Applicant Information

First Name	_____	Middle Name	_____
Last Name	_____	Maiden/Other Name	_____
Date of Birth	____ / ____ / ____	Sex	_____
		Race	_____
Natural Hair Color	_____	Eye Color	_____
		Height	_____
Street Address	_____		Apt # _____
City	_____	State	_____
		Zip Code	_____
Place of Birth (City, State or Country)	_____		
Telephone Number	(_____) _____ - _____		
Email Address	_____		
Do you have any tattoos?	Yes	No	
If yes, please list the location and description of the tattoo:			

Driver License State Issued	_____
Driver License Number	_____
Driver License Expiration Date	____ / ____ / ____
Passport Country of Issue	_____
Passport #	_____
Passport Expiration Date	____ / ____ / ____
Country of Residency	_____
If not a resident of the United States:	
Do you have a valid work permit?	Yes No
Alien Number Issued by the Department of Homeland Security or Other Federal Immigration Agency:	A# _____

OFFICE USE ONLY	License Year: _____	License Number: _____
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Establishment Information

List all of the adult entertainment establishments that you will be or are currently working at, with the corresponding stage name/alias.

(Stage name must match on adult entertainment application on file with the adult entertainment establishment.)

Establishment Name	Stage Name/Alias

In the last 5 years have you ever been convicted of an offense under FL Statutes Chapter 796 (Prostitution)?	Yes	No
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Do you currently hold any other adult entertainment related licenses/permits in another county?		Yes	No
Name of Business	Address	Current Status (Current, Suspended, Revoked)	

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By signing my initials, I swear or affirm that I have read, and understand that I am subject to Municipal Ordinance Code, Chapters 150 and 151.

Initials

By signing my initials, I swear or affirm that I have viewed the Human Trafficking Training Video.

Initials

I, _____, swear or affirm that I am the above named applicant applying for a Jacksonville Performer Work identification Card, and I declare under penalties of perjury, that the answers contained in the application and any supporting documentation has been submitted by me. This application and supporting documents are true, correct, and complete. Further, I understand that any falsifications or omissions of the application or supporting documents are grounds for the denial, suspension, or revocation of the Performer Work Identification Card.

Print Name

Signature

_____/_____/_____
Date

Notary Acknowledgment

Sworn to and subscribed before me this _____ day of _____, 20____, by the referenced applicant who is personally known to me or who has produced a _____ as identification and who did take an oath.

Notary Public
State of Florida