

**TERROR  
IN THE PARK**  
**HAUNTED HOUSE**

**Volunteer Application**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Age:  16-17 or  18 and over

Hobbies/Talents as related to an Haunted Attraction: \_\_\_\_\_  
\_\_\_\_\_

**Position Desired:**

\_\_\_\_ Actor \_\_\_\_ Security \_\_\_\_ Make-up Artist \_\_\_\_ Special Effects \_\_\_\_ Box Office

**Emergency Medical Information:**

Do you have or are you subject to: (Please mark all that apply and explain)

Asthma  Seizures  Heart Trouble  Diabetes  Fainting Spells  Bleeding Disorders  Other  None

Explain: \_\_\_\_\_

Allergy to medicine, food, make-up, material? Explain: \_\_\_\_\_  
\_\_\_\_\_

Any condition that may require special care, medicine, or diet? Explain: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

I certify that the above answers are true and complete to the best of my knowledge. I authorize the "Terror In The Park" Haunted House to investigate and statement contained in this application. I understand that this application is not and is noted intended to be any kind of contract or agreement. In the event of employment, I understand that any false or misleading information given in my application, correspondence, discussions or interview may

result in immediate termination. I understand also, that I am required to abide by all rules, regulations and policies of "Terror In The Park" Haunted House.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please place an "X" in the days that you are AVAILABLE to work.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
22 <b>SEPT</b>	23	24	25	26	<b>27</b> Start 4pm	<b>28</b> Start 4pm
29	30	1 <b>OCTOBER</b>	2	3	<b>4</b> Start 4pm	<b>5</b> Start 4pm
6	7	8	9	10	<b>11</b> Start 4pm	<b>12</b> Start 4pm
13	14	15	16	17	<b>18</b> Start 4pm	<b>19</b> Start 4pm
20	21	22	23	24	<b>25</b> Start 4pm	<b>26</b> Start 4pm
27	28	29	<b>30</b> Start 4pm	<b>31</b> Start 4pm	<b>1</b> Start 4pm <b>NOV</b>	<b>2</b> Start 4pm