



# Volunteer Application

\* = Required

\* First Name \_\_\_\_\_ \* Last Name \_\_\_\_\_

\* Address \_\_\_\_\_

\* City \_\_\_\_\_ St \_\_\_\_\_ \* Zip \_\_\_\_\_

\* Phone \_\_\_\_\_ Cell \_\_\_\_\_

\* Email \_\_\_\_\_

\* Age  Over 18  16—18

Theatrical / Haunted House Experience \_\_\_\_\_

\_\_\_\_\_

Hobbies / Talents \_\_\_\_\_

Roles you are interested in \_\_\_\_\_

\* Please Circle Dates that you are available:

| October 2009 |    |    |    |    |    |    |
|--------------|----|----|----|----|----|----|
| S            | M  | T  | W  | T  | F  | S  |
|              |    |    |    | 1  | 2  | 3  |
|              |    |    |    | 8  | 9  | 10 |
|              |    |    |    | 15 | 16 | 17 |
| 18           | 19 | 20 | 21 | 22 | 23 | 24 |
| 25           | 26 | 27 | 28 | 29 | 30 | 31 |

Check any issues you experience:  Allergic to certain types of stage makeup  Bothered by chemical foggers  
 Stage Fright  Claustrophobic  Vision disorder in dimly lit rooms  
 Afraid of the dark  Seizures  Uncontrollable urge to bite someone

\* Emergency Contact Name \_\_\_\_\_

\* Emergency Contact Phone \_\_\_\_\_

How did you hear about this opportunity? \_\_\_\_\_

Costume Size: Waist \_\_\_\_\_ Height \_\_\_\_\_ Chest \_\_\_\_\_ Arm \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

How happy are you to be here?  So-so  Pretty Good  Extremely  I think I just wet my pants

Welcome to our Monster Family! Please review the Monster Manual and adhere to its guidelines while serving here.