

Actor Release Form

Because safety is one of our top priorities, please fill out the below information to better assist us in the event of an emergency. This information will also help us in preventing any unforeseen circumstances. And will be kept confidential.

Full Legal Name _____ Age _____
School _____ Grade (if applicable) _____
Date of Birth _____
Address _____
Home Phone _____

Medical Information:

Please List Any Known Allergies (dust, latex, makeup, etc.) _____

Do You Have Any Known Physical Conditions That May Place You At Risk While Working In A Haunted Attraction? (epilepsy, heart condition, pregnancy etc.)

Actors Under 18:

Parent(s)/Guardian(s)
Name _____
Emergency Parent Phone
Number(s) _____

In The Event That We Are Unable To Contact Either Parent or Guardian, Please Supply 2 Additional Emergency Contact Names And Telephone Numbers. Please Include Relationship

1. _____ 2. _____

Actors Over 18:

Whom Should We Contact In The Case Of An Emergency?
Name _____ Phone1 _____ Phone2 _____

I hereby, for my heirs, my executors, administrator and myself, waive all rights and claims for damages I may have against Fearscape Productions LLC , The Frightuary haunted attraction, their staff, sponsors, vendors, contractors, the Lane Events Center, and any others related to the attraction. I grant full permission for organizers to use photographs, video and quotations from me or including me without compensation in legitimate accounts and promotions of this event. I consent to the named person, whether myself or my child, working as a volunteer at The Frightuary haunted attraction. I understand that every reasonable effort will be made to attend all of my scheduled work days and meetings. I have read the rules attached to this application and understand that I will be responsible for following these rules and that not following them may result in my dismissal as a volunteer and may affect my future volunteer opportunities with The Frightuary .

Volunteer Signature (all ages), Date

Parent/Guardian Signature (if under 18) Date
2015