



FRIGHTMORE ACADEMY

Applicant Information

Full Name: _____ Date of Birth: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone #: _____ Email: _____

Days Available: FRI SAT SUN

October Dates Unavailable: _____ Social Security#: _____

*Each paid actor must be present each night throughout the course of operation.
*Each paid position will be paid at the conclusion of each week.

Experience

Please list any previous acting or haunted house experience.

Company: _____ City: _____

From: _____ To: _____ Were you an actor? YES NO Position: _____

Company: _____ City: _____

From: _____ To: _____ Were you an actor? YES NO Position: _____

Halloween / Horror Interests

Please select your top 3 acting scene choices.

- Snake/Spider Library Torture Infirmary Dracula Mummy Clowns Graveyard
 Cornfield Cabin Playground Quarantine Meat Locker/Maze Butcher Shop

What is your favorite scary movie(s)?

If you could choose to play any character or type of character from the horror genre, what would it be?

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

*If you have a quality costume that you are interested in using or items that you feel may be beneficial to the haunted house production, please bring them with you to dress rehearsal.