

Actor Information Sheet

Name _____ Age _____

Address _____ SS # _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell _____

Email Address _____

Emergency contact person _____ Phone _____

Previous Acting or Haunted House Experience _____

All actors are requested to arrive 60 minutes prior to performance wearing black clothing.

Indicate with an X the dates on the calendar that you will be available to perform.

Performance times: Sun-Thurs 7pm-10pm, Fri & Sat 7pm-Midnight (Chatfield 7pm-11pm)

___ Parker ___ University ___ Chatfield

				Oct. 1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31