	<u>ABOR AGREEMENT</u> – YOU REPOR ANCE FOR ANY INJURY. YOU AR	
CONTRACT	<u></u>	DATE
NAME		
	FIRST	CITY ZIP
PH #	EMAIL:	
SS #	BER IS REQUIRED IF YOU WANT TO GET P	PAID
TX DRIVERS LICENSE # (IF YOU HAVE ONE) EMERGENCY CONTACT FAI	DATE OF BIRTH	AGE
DO YOU HAVE A CRIMINAL R DO YOU HAVE HEALTH INS (YOU MUST HAVE YOUR OWN INJURY INSURAN HAUNT EXPERIENCE? WHI	SURANCE? Y / N	
EXISTING MEDICAL CONDI (MUST LIST ALL EXISTING HEALTH CONDITIO	TION OR LIMITATION?	EEDED)
OR WE CAN LOAN THEM. YO BASE COSTUME/UNIFORM. M OWN UNIQUE CHARACTER A TAXES ARE WITHELD OR PA	U CHOOSE YOUR WORK SCHE MAKE-UP IS AVAILABLE OR US ND DIALOGUE. AS A PART TIM ID FROM YOUR CHECK. YOU M	E SUPPLIES, EQUIPMENT, TOOLS EDULE. YOU SHOULD PROVIDE A E YOUR OWN. DEVELOP YOUR ME CONTRACTOR - NO PAYROLL IUST REPORT AND PAY YOUR OWN OF WORK. YOU NEED INSURANCE.
ACTOR PAY FOR HOURS OPEN – NOT ARRIVAL TIME \$10.00 PER HOUR – ACTORS PHOBIA VETS: \$12.00 PER HOUR	YOU MUST WORK A MINIMUM (ONLY EXCEPTIONS: LATE SEASO	NLESS LATE START(IN-SEASON) OF 25 HOURS FOR A PAYCHECK ON START OR SPECIAL AGREEMENT AYS, SATURDAYS & HALLOWEEN (S IF POSSIBLE)
MANAGERS, TEAM LEADERS: \$ SPECIAL RATE \$		
LIST DAYS YOU <u>WILL NOT</u>	<u>WORK</u> , IF YOU KNOW NOW:	:

CALENDAR IS AVAILABLE ONLINE – DARKE.COM

WE ARE A TEAM. YOU MUST ENJOY THIS JOB. DO NOT TOUCH OR ABUSE CUSTOMERS IN ANY WAY. IF YOU STEAL, CHEAT OR COME LATE TO WORK - DO NOT APPLY. PHOBIA IS MORE THAN A JOB, IT IS A LABOR OF LOVE. WE REQUIRE YOU TO ENJOY THE WORK, RESPECT CO-WORKERS AND PATRONS, AND BE COURTEOUS, SINCERE AND RELIABLE, OR LEAVE. <u>SAFETY FIRST</u> AVOID INJURY. DO NOT RUN, HANG OR CLIMB WALLS, RAILS, ETC. DO NOT USE STICKS, ETC. OR NOISEMAKERS. PHOBIA IS ONE OF THE BEST HAUNTED ATTRACTIONS EVER, ANYWHERE, BECAUSE OF YOU. HELP US KEEP IT GREAT! HAUNTED HOUSES ARE INHERENTLY DANGEROUS. BE CAREFUL – DON'T HURT YOURSELF OR OTHERS. AS A CONTRACTOR, YOU MUST HAVE YOUR OWN INSURANCE FOR INJURY, AND REQUIRED EQUIPMENT & SUPPLIES. WE USE LATEX PRODUCTS. WE DO NOT CONTROL DETAILS OF WORK.

READ BEFORE SIGNING

I AM CONTRACT LABOR. I HAVE MY OWN INJURY & HEALTH INSURANCE. I WILL BE CAREFUL AND SAFE. I WILL NEVER SUE PHOBIA. I WILL HOLD PHOBIA & ITS AGENTS HARMLESS FROM ANY DAMAGE OR INJURY. MODEL RELEASE – PHOBIA HAS THE RIGHT TO USE MY IMAGE & PHOTOS FOR ADS, PROMOTIONS, ETC.

PHOBIA DOES NOT CONTROL DETAILS OF WORK

SIGN HERE: AGREED & ACCEPTED _____

DATE / /

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