

VOLUNTEERS WANTED -



Join the scariest volunteer event in the Twin Ports Area!!

Haunted Shack / Haunted-Ridge, Carlton MN

All ages both young and old can be a part of this amazing event. The Haunted Shack and the Haunted-ridge organization invites you to be an integral part of the largest haunted attraction north of the Twin Cities! We see all ages witnessing the true terror at the Haunted Shack & Haunted-Ridge Why? Because we have long been recognized among the ranks of haunted places in the mid-west. It provides just enough atmosphere...a retreating footstep here, a fading whisper there...to make the ever-growing sub-culture of paranormal enthusiasts emphatically declare the place to be a haven to phantoms, ghouls, spirits, lingerers-on, or any other name by which a ghost may be called.

Every October, at the Haunted-Ridge, the Haunted Shack crew will terrify the innocent and play with the minds of thousands of souls entering the grounds, and we want your HELP!!!

Join the coolest and scariest volunteer crew in Minnesota.

Volunteer any or all nights of the Haunted Shack - and have a ghoulish fun time! Signup Today! Help fulfill your *Civic Engagement Requirements for Graduation or raise monies for your group / organization* and volunteer today.

Do you belong to a group or organization that is looking to raise money? For a small commitment you can earn monies towards your group or organization. Contact us for more information on Fundraising opportunities.

We depend on volunteers like you, as well as the community to keep the Haunted Shack haunted attraction alive. We look forward to meeting and working with new people who want to become involved.

At the start of each shift use the designated VOLUNTEER ACCESS ENTRY POINT

Located on the Southwest side of the Haunted Shack Building.

Positions that are available each season: Actors/Monsters Security / Parking Tractor Drivers

Open Nights: LOCATION: 1781 County Rd 1, Carlton, MN 55718

- Friday Oct 14th Opening night 6pm - 10:30pm
- Saturday Oct 15th 6pm - 10:30pm
- Sun Oct 16th 6pm - 9:30pm
- Thurs Oct 20th 6pm - 9:30pm
- Fri Oct 21st 6pm - 10:30pm
- Sat Oct 22nd 6pm - 10:30pm
- Thurs Oct 27th 6pm - 9:30pm
- Fri Oct 28th 6pm - 10:30pm
- Sat Oct 29th 6pm - 10:30pm

ADDITIONAL DATES AVAILABLE:

Kids Day Oct 22nd 9am - 3pm or Tear Down Sunday October 30th - 9am to 3pm

Questions call or text

Pat: 218-348-1561 Event Operations

What to Expect when Volunteering:

9 Nights Between October 14th thru October 29th -
Fridays, and Saturdays and volunteer hours are from 6 PM to approximately 11 PM.

Thursday and Sunday evening the volunteer hours are from 6 PM to approximately 10 PM.

Please note that events may be longer or shorter depending on the crowds each evening

When Working the Event:

-When arriving please notify the parking staff at the entrance gate that you are a volunteer. *Parking for volunteers is available at the south side of the Haunted Shack building by the semi-trailers.*

- Each day you volunteer you must check in when you arrive and depart.

- Volunteers must adhere to all rules and regulations.

- Volunteers must obey all staff safety requirements.

- Volunteers may be placed in dark areas with lots of light effects and fog machines. Please let us know if you have concerns or issues regarding this type of placement.

- For your comfort, bring warm clothing. You will be working on a farm environment. Inside / Outside elements.

- Dress in all black or dark clothing if possible. Please wear comfortable shoes. No sandals or open toe or open heel shoes allowed. If at all possible we ask you keep with the all black or dark colored theme and do not wear white or colored footwear!

- Also recommend you bring a water container or bottled water.

2022 October Dates of the Event:

14th, 15th, 16th, 20th, 21st, 22nd, 27th, 28th, 29th.

Special Requirements:

All volunteers must have some form of identification in order to check in for the event.

Haunted Shack wants to allow all ages that have a sinister interest in Halloween be allowed to work in the haunted houses to enjoy an experience in volunteering at this event. Because of the nature of the event, we do have some age requirements.

Volunteer under the age of 18 MUST have their registration signed by a parent or guardian.

Volunteer under the age of 12 MUST also have a parent or guardian with them at all times of the event.

Free food and refreshments will be provided to the volunteers each evening.

Breaks will be given throughout the volunteer's time at the event.

WHAT WE STAND FOR:

The Haunted Shack / Haunted-Ridge is one of the largest fundraisers for the LOCAL Special Olympics. It also collects nonperishable food items for the LOCAL Chum Food Shelf and collects coats for the Northland Coats for Kids Program. We recently teamed up with other local organizations and have been contributing to their organization.

Proceeds from this event goes towards the LOCAL Special Olympics, Chum Food Shelf, and Northland Coats for Kids, and other local organizations.

- We supply all Costumes and make-up. We have an entire 45ft trailer set up as a professional costume / make-up room.
- Acting - scaring the spectators coming through the haunt.
- Actors are needed inside the haunt, in the corn trail and on the hay wagon ride. (wherever is needed)
 - We try to keep the organizations together but on some occasions we may need to split them up.
- We offer acting / Makeup classes prior to the event. (About 1 hr.)
- We provide food / beverage MOST nights.
 - Volunteers should plan on bringing bottle water with them.
 - Actors need to clean up after themselves nightly to keep animals away.
- All acting locations have office trailers to take breaks, get out of the elements, and warm up.

At the start of each shift use the designated

VOLUNTEER ACCESS ENTRY POINT

Located on the Southwest side of the Haunted Shack Building.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Phone #: _____

Volunteer Type: (circle one)

SUPPORT STAFF (must be 16years old) ACTORS (Preferred age 10+ but with an adult any age)

Total # of Nights: _____ Total # of Nights: _____

Preference, please rate 1st, 2nd, 3rd: Hayride_____ Haunted Trail_____ Haunted Shack_____

This is just a preference: We may need you to act or help in another location depending on volunteers for that evening scheduled.

Actors- Make up and acting class dates and times: Please select at least one class time- may come to more than one if you choose. If these dates do not work for your group please let us know and we will schedule a date for your group / organization.

- _____ Sat Oct 1st - 1pm to 3pm
- _____ Sun Oct 2nd - 1pm to 3pm
- _____ Sat Oct 8th 3pm to 5pm
- _____ Sun Oct 9th 1pm to 3pm

Open Nights: -----

Please check the nights you will be volunteering

- _____ Friday Oct 14th Opening night 6/6:30pm- 10/10:30pm
- _____ Saturday Oct 15th 6/6:30pm- 10-10:30pm
- _____ Sun Oct 16th 6/6:30-9/9:30pm

- _____ Thurs Oct 20th 6/6:30-9/9:30pm
- _____ Fri Oct 21st 6/6:30- 10/10:30pm
- _____ Sat Oct 22nd 6/6:30- 10/10:30pm

- _____ Thurs Oct 27th 6/6:30-9/9:30pm
- _____ Fri Oct 28th 6/6:30- 10/10:30pm
- _____ Sat Oct 29th 6/6:30-10/10:30pm

ADDITIONAL DATES AVAILABLE:

Kids Day Oct 22nd 9:00am- 3:00pm

Tear Down Sunday October 30th 9am to 3pm

RELEASE, INDEMNIFICATION, AND HOLD HARMLESS AGREEMENT

In consideration of participating in haunted house activities and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence The Haunted Shack, Haunted-Ridge, Ru-Ridge Corn Maze, Jeremy Rubesh and its owners, directors, officers, employees, agents, volunteers, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that these activities involve known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to broken bones, bruises and other bodily injuries caused by falls or contact with walls, objects or other participants; medical conditions resulting from physical activity; damaged clothing or other property, coming in contact or contracting the Covid-19 virus or any other viruses. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I expressly accept and assume all the risks inherent in this activity or that might have been caused by the negligence of the Releasees known that this event is in a group setting and that I may come in contact or contract the Covid-19 virus or strains of and any other viruses. My participation in this activity is purely voluntary and I elect to participate and release any liability from the Releasees despite the risks
4. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
5. I represent that I have adequate insurance to cover any injury or damage I suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of- all risks that may be created, directly or indirectly, by any such condition.
6. In the event that I file a lawsuit, I agree to do so solely in the state where the Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
7. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my rights to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I choose to not sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain.

I have read and understood this document and agree to be bound by its terms.

Print Name _____

Address _____ City _____ State _____ Zip _____

Signature _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT - (Must be complete for Participants under the age of 18)

In consideration of the minor/ minors listed below being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor/ minors or are in any way connected with such participation by minor/ minors.

Name/s of Minor/s _____

Parent Guardian Signature _____ Date _____