

KENZER AND COMPANY PLAYTESTING APPLICATION

NAME (FIRST, MI, SURNAME): _____

ADDRESS: _____

CITY, STATE, POSTAL CODE: _____

COUNTRY: _____

KENZERCO FORUM SCREEN NAME: _____

EMAIL (PRIMARY): _____

EMAIL (SECONDARY): _____

DO YOU RUN A REGULAR ROLEPLAYING GROUP? (YES/NO) _____

HOW MANY TIMES DO YOU PLAY EACH WEEK? _____

WHAT GAMES DO YOU REGULARLY PLAY? _____

HAVE YOU EVER BEEN A PLAYTESTER BEFORE? (YES/NO) _____

WHAT GAMES/COMPANIES HAVE YOU PLAYTESTED? _____

WHY DO YOU WANT TO BE A KENZER AND COMPANY PLAYTESTER? _____

Important Note: It is your responsibility to let us know if any of this information changes at any time. You are working with confidential, proprietary company information and we must know how to contact you.

You are required to submit a Non-Disclosure Agreement (NDA) with this application.