

Thinking Room Productions

PO Box 19027

Hamilton 3244

Date _____

Full Name _____

Street Address _____

Phone Numbers Home (0) _____ Cell (0) _____

Work (0) _____

Email _____

Male/Female Age ___

Height ___ Weight ___

Hair colour _____ Hair length _____

Ethnicity _____

Sizes: MEN	Sizes: WOMEN
Chest	Bust/Bra
Waist	Waist
Inseam	Hips
Shirt	Dress
Pants	Pants
Shoes	Shoes

Costumes you have _____

Previous acting experience _____

Dance _____

Musical instruments _____

Special skills _____

Dialects/accents _____

If over 18, partial nudity /underwear YES NO

Could you smoke on camera YES NO

AVAILABILITY

notes:

Weekends YES NO _____

Weekdays YES NO _____

Week nights YES NO _____

Can work as (circle):

Extra

Principal actor

Dancer

Singer

Please keep my application in your file for future projects YES NO

Emergency contact (0) _____

Please remember to attach photos. Preferably one headshot and one full length.

Please mail to: Thinking Room Productions, PO Box 19027, Hamilton 3244
or scan and email with photos to info@thinkingroom.co.nz