

Open Casting Application/Call Sheet

Please print clearly

ACTOR'S NAME:					— Photo —
BIRTHDAY:					
ADDRESS:					
HOME PHONE #:					
MOTHER'S NAME & CELL PHONE #:					
FATHER'S NAME & CELL PHONE #:					
AGE:	HEIGHT:	WEIGHT:	HAIR COLOR:	EYE COLOR:	

PLEASE LIST ANY PREVIOUS ACTING TRAINING OR PROFESSIONAL EXPERIENCE:

PLEASE LIST ANY UNION AFFILIATIONS (E.G., SAG, EQUITY, AFTRA):

FOR CASTING AGENCY USE

Nancy Naylor Battino casting #: _____

Check-in time: _____

PLEASE DO NOT WRITE BELOW