

TALENT INFORMATION FORM

Contact Info

Name _____ Phone _____

Address _____ eMail _____

Personal Info

Age _____ Gender _____ Height _____ Weight _____ Eye Color _____

Hair color _____ Hair length _____ Facial Hair _____

Tattoos/Distinguishing Marks _____

Past acting experience, dates

Special Skills?

Write your name in **LARGE BLOCK LETTERS** on the back of this page.
You will hold it in front of you during your camera test.