

Actor's Deal Memo

Name of Student

Production title

Date

Actor's Name & EID or SSN

Address

Phone & Fax

Agent (if applicable)

Agency

Phone & Fax

Manager (if applicable)

Address

Phone & Fax

Publicist (if applicable)

Phone

Phone & Fax

Actor's Role

Start Date

Billing

Deal:

Daily/Weekly/Show

Guarantee

DETAIL:

Travel:

Fittings:

Rehearsal:

Principal:

Additional:

Post:

DATES:

Dressing Room:

Meals Allowance:

Travel:

Hotel:

Other:

Approval: