

# 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:

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

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**FOR CASTING AGENCY USE**

Nancy Naylor Battino casting #: \_\_\_\_\_

Check-in time: \_\_\_\_\_

**PLEASE DO NOT WRITE BELOW**