

TAKE TEN REGISTRATION FORM FOR UNDER 12'S

CASTING#	BC	HOG	NON HOG	REG FEE		C Q I	TT
ADMIN	PHOTOS	15X20 (J)			20X30 (A4)		
NAME							
SURNAME							
DATE OF BIRTH	DAY			MONTH		YEAR	
PARENT/GUARDIAN							
ID NUMBER OF ARTIST							
PASSPORT EXPIRY DATE PARENT/GUARDIAN							
PASSPORT EXPIRY DATE CHILD							
TEL - HOME			FAX				
TEL - WORK			NAME				
FAX - WORK			NAME				
CELL NO			NAME				
ALT CELL NO			NAME				
EMAIL ADDRESS							
ALT EMAIL ADDRESS							
HOW OFTEN DO YOU CHECK YOUR EMAIL			ONLINE 24/7	DAILY	WEEKLY	MONTHLY OR LESS	
RESIDENTIAL ADDRESS							CODE:
POSTAL ADDRESS							CODE:
NATIONALITY/ ETHNIC ORIGIN			HAIR COLOUR/TYPE			MALE	FEMALE
RELIGION	EYE COLOUR		BLUE	BROWN	GREEN	OTHER -	
SKIN COLOUR	BLACK	COLOURED	INDIAN	ASIAN	WHITE	OLIVE	FAIR
PLEASE DO NOT FILL OUT THE MEASUREMENTS IN BOLD, THEY WILL BE DONE AT THE STUDIO							
DATE							
HEIGHT							
WEIGHT							
SHOE							
CLOTHING							
TALENTS - FOR BABIES SPECIFY IF SITTING, CRAWLING, AND/OR WALKING YET							
SPORTS							
MUSICAL							
LANGUAGES							
OTHER/ PREVIOUS EXPERIENCE							
ALLERGIES							
ARE YOU PREPARED TO DO THE FOLLOWING? PLEASE TICK WHERE APPLICABLE.							
MEAT PRODUCTS	Y	N	SWIMWEAR	Y	N	UNDERWEAR	Y N

