

******PLEASE PRINT CLEARLY IN EACH COLUMN TO ENSURE PAYMENT******
ACTRA-ACA Non-Members Commercial Audition Sign-in Time Sheet Part A

Date: _____
Day Month Year

Page _____ of _____

Check Appropriate Box Television Radio Regional Short Life Infomercial PSA New Media Joint Promotion US use only Doubleshoot	Advertising Agency _____	Email this form within 2 days of the audition to the Advertising agency and the local ACTRA office: Newfoundland & Labrador Maritimes maritimes@actra.ca Montreal montreal@actra.ca Ottawa ottawa@actra.ca Toronto nca@actratoronto.com Manitoba manitoba@actra.ca Saskatchewan saskatchewan@actra.ca Alberta alberta@actra.ca UBCP (Vancouver) Commercial-Email@ubcpactra.ca
	Agency Producer _____	
	Email _____	
	Telephone Numbers _____	
Sponsor _____	Shoot Location (City) _____	
Product _____	Production Company _____	Casting Director _____
Intended Use _____	Line Producer _____	Commercial Title(s) _____
		Intended Production Date(s) _____

APPENDIX "F" (PART A)

The section below is to be completed by Performers - please print clearly

Name	Address	Talent Agency	Special Wardrobe/ Costume Required by Casting	Specific Role	Audition Number for Specific Role	Audition Arrival Time	Audition Call Time	Audition Time Out	Initial

ENGAGER SIGNATURE _____