

**APPENDIX "E"**  
**ACTRA-ACA COMMERCIAL CASTING/BOOKING CONFIRMATION FORM**

Ad Agency \_\_\_\_\_

Product \_\_\_\_\_

Conflict Category \_\_\_\_\_

Examples \_\_\_\_\_

Performer Name \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Alternate Phone (\_\_\_\_) \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_

Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Agent \_\_\_\_\_

Agent Phone (\_\_\_\_) \_\_\_\_\_

ACTRA  
Member

ACTRA  
Apprentice

UdA  
Member

**Audition:** ACTRA      SAG      ACTRA/UdA

\_\_\_\_\_ Available: Yes      No  
 Shoot Date

Competitive products on air (see Article 2003,  
 with the exception of seasonal commercials):

\_\_\_\_\_

**BOOKING CONFIRMATION**

Category _____	
<b>Rates:</b>	
Session _____	Resid. _____ Other _____
Emailed to _____	From _____
Agent Email _____	Rec'd. _____
Performer Email _____	Rec'd. _____

PERFORMER PHOTO HERE

**PSA – PUBLIC SERVICE ANNOUNCEMENT**

Charity/PSA      Yes      No

Paid?      Yes      No

\_\_\_\_\_  
 Performer Signature

**SIZES:**      Adult \_\_\_\_\_      Children \_\_\_\_\_

Pants/Skirt \_\_\_\_\_      Shirt/Blouse \_\_\_\_\_

Dress/Jacket \_\_\_\_\_      Shoes \_\_\_\_\_

Special requirements (e.g., allergies,  
 asthma, vertigo):

\_\_\_\_\_

NATIONAL	TV	RADIO	DIGITAL MEDIA
BUNDLE NATIONAL	REGIONAL CHANGES		DEMO
SEASONAL	TAGS	DEALER	PSA

LOCAL/ REGIONAL	INFO- MERCIAL	OTHER
SHORT-LIFE	7 DAYS	14 DAYS
31 DAYS	45 DAYS	CHANGE

\_\_\_\_\_  
 Performer's Signature

\_\_\_\_\_  
 Date