

**\*\*\*\*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 \_\_\_\_\_

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

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 \_\_\_\_\_