

**\*\*\*PLEASE PRINT CLEARLY IN EACH COLUMN TO ENSURE PAYMENT\*\*\***  
**ACTRA-ICA/ACA Full And Apprentice Members Commercial Audition Sign-in Time Sheet**  
**Part A**

Date: \_\_\_\_\_  
 Day      Month      Year

Page \_\_\_\_\_ of \_\_\_\_\_

<b>Check Appropriate Box</b>  Television ( )      Radio ( ) Regional ( )      Short Life ( ) Infomercial ( )      PSA ( ) Internet ( )      Joint Promotion ( ) SAG: CDN\$ ( )      SAG: US\$ ( )	<b>Advertising Agency</b>	<b>Fax this form within 2 days of the audition to the Advertising agency and the local ACTRA office:</b> Newfoundland & Labrador (709) 722-2113 Maritimes (902) 422-0589 Montreal (514) 844-2068 Ottawa (613) 565-4367 Toronto (416) 928-2852 Manitoba (204) 947-5664 Saskatchewan (306) 359-0044 Edmonton (780) 433-4099 Calgary (403) 228-3299 UBCP (Vancouver) (604) 689-1145
	<b>Agency Producer</b>	
	<b>Fax / Telephone Numbers</b>	
<b>Advertiser</b>	<b>Shoot Location (City)</b>	
<b>Product</b>	<b>Production Company</b>	<b>Casting Director</b>
<b>Intended Use</b>	<b>Line Producer</b>	<b>Commercial Title (Name and Number)</b>
		<b>Intended Production Date(s)</b>

APPENDIX "F" (PART A)

**The section below is to be completed by performers**

Name	ACTRA Number	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 \_\_\_\_\_

**\*\*\*PLEASE PRINT CLEARLY IN EACH COLUMN TO ENSURE PAYMENT\*\*\***

## ACTRA-ICA/ACA Non - Members Commercial Audition Sign-in Time Sheet Part A

Date: \_\_\_\_\_  
 Day      Month      Year

Page \_\_\_\_\_ of \_\_\_\_\_

<b>Check Appropriate Box</b>  Television ( )      Radio ( ) Regional ( )      Short Life ( ) Infomercial ( )      PSA ( ) Internet ( )      Joint Promotion ( ) SAG: CDN\$ ( )      SAG: US\$ ( )	<b>Advertising Agency</b>	<b>Fax this form within 2 days of the audition to the Advertising agency and the local ACTRA office:</b> Newfoundland & Labrador (709) 722-2113 Maritimes (902) 422-0589 Montreal (514) 844-2068 Ottawa (613) 565-4367 Toronto (416) 928-2852 Manitoba (204) 947-5664 Saskatchewan (306) 359-0044 Alberta (403) 228-3123 UBCP (Vancouver) (604) 689-1145
	<b>Agency Producer</b>	
	<b>Fax / Telephone Numbers</b>	
	<b>Advertiser</b>	
<b>Product</b>	<b>Production Company</b>	<b>Casting Director</b>
<b>Intended Use</b>	<b>Line Producer</b>	<b>Commercial Title (Name and Number)</b>
		<b>Intended Production Date(s)</b>

**APPENDIX "F" (PART A)**

**The section below is to be completed by performers**

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 \_\_\_\_\_

## ACTRA-ICA/ACA COMMERCIAL AUDITION SIGN-IN SHEET PART B

**THIS SECTION TO BE COMPLETED BY CASTING DIRECTOR**

DATE: \_\_\_\_\_  
           DAY          MONTH          YEAR

PAGE \_\_\_\_\_ OF \_\_\_\_\_

✓ CHECK APPROPRIATE BOX: TELEVISION ( ) RADIO ( ) INFOMERCIAL ( ) OTHER (SPECIFY) ( ) INTENDED USE	FAX THIS FORM WITHIN 2 DAYS OF THE AUDITION TO 416-482-1856 INSTITUTE OF COMMUNICATIONS AND ADVERTISING 2300 YONGE STREET, SUITE 500, Box 2350 TORONTO, ONTARIO M4P 1E4	) ON CAMERA ( ) OFF CAMERA ( ) TOTAL NUMBER AUDITIONED
CASTING DIRECTOR	COMMERCIAL TITLE (NAME & NUMBER)	Advertiser
PRODUCT	INTENDED PRODUCTION DATE JOB NUMBER	ADVERTISING AGENCY & CITY PRODUCTION COMPANY

**THIS SECTION TO BE COMPLETED BY PERFORMERS (PLEASE PRINT CLEARLY)**

This is a VOLUNTARY form. You are NOT required to complete it. However, ACTRA and the ICA/ACA request that you complete this form so that it may be determined how well commercials reflect the ethnic, sexual and age differences in our society. To protect your privacy, names are not requested. Your ACTRA number is requested to ensure the legitimacy of this information.

Please place an X in the appropriate box: C=Caucasian; B=Black; AE=Afro-European; AP=Asian Pacific; EA=Eurasian; AFA=Afro-Asian; NAI=North American Indian; M=Métis; I=Inuit; LH=Latino/Hispanic; MENA=Middle Eastern/North African; IP=Indo-Pakistani.

**PLEASE PLACE AN X IN THE APPROPRIATE BOX**

ACTRA No.	INITIAL	MALE	FEMALE	AGE	C	B	AE	AP	EA	AFA	NAI	M	I	LH	MENA	IP

ENGAGER SIGNATURE \_\_\_\_\_