



ACTRA

ACTRA Diversity Survey

ACTRA ensures that all personal data collected in this survey will be held in accordance with the Data Protection Act 1998 and will not be distributed or shared.

Fill this interactive form and
(1) Click Submit By Email button to email to ACTRA
(2) Print form and Fax to Jani Lauzon @ 416.928.2026
(3) Mail or drop off the printed form to:

Jani Lauzon
Diversity Committee
c/o ACTRA Toronto
625 Church Street
Toronto ON M4Y 2G1

Name[Optional]: _____

Are you an ACTRA member: Yes: No:

Discipline: Actor: Director: Producer: Writer: Other: Specify: _____

Are you aware of the ACTRA agreements: Yes: No:

If yes, have you made, or been hired to act in, a film under an ACTRA agreement before and if so, which one?

Do you self identify as a member of a culturally specific community as an actor/filmmaker with a disability: Yes: No:

If yes, please specify, ie: what is your ethnicity or disability:

How many times have you been approached by a producer from your cultural community to work on a non-union project and been unable to participate:

What do you think are the top 3 obstacles for produces from your cultural community to produce under an ACTRA agreement?

1. _____
2. _____
3. _____

What are the top 3 suggestions you would make to ACTRA to encourage more producers from your cultural community to produce under an ACTRA agreement.

1. _____
2. _____
3. _____

What are the top 3 suggestions you would make to ACTRA to encourage more performers from your cultural community to become ACTRA members?

1. _____
2. _____
3. _____

In your opinion, is there anything that ACTRA could do to help promote diversity within the Canadian Film Industry?

