

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