

ARAB AMERICAN ACTORS.org

Actor Registration Form

Please fill out this form and email to: arabamericanactors@gmail.com. Please also email jpegs (300k minimum size) of your headshot(s) and resume(s).

Name:

Unions:

Personal Contact Information:

Mobile Phone

Home Phone

Voicemail

Email address

Website

Agencies: (please list all your representation)

Where do you live?

In what cities are you a local hire?

Which languages do you speak?

ARABIC

Read? yes/no Write? yes/no Speak? yes/no

Please rate your level of speaking ability:

1 (*basic* conversation w/ good pronunciation) – 10 (native speaker)

FARSI

Read? yes/no Write? yes/no Speak? yes/no

Please rate your level of speaking ability:

1 (*basic* conversation w/ good pronunciation) – 10 (native speaker)

Other language(s) _____

Please list any accents that you are proficient with.

Are you willing to do background work? yes / no

SIZES (MALES ONLY):

JACKET _____ NECK _____ SLEEVE _____ WAIST _____

INSEAM _____ SHOE _____

SIZES (FEMALES ONLY):

BUST/CUP _____ WAIST _____ HIPS _____ SLEEVE _____

INSEAM _____ DRESS _____ SHOE _____

Do you own any ethnic clothing? Yes / no

If yes, please describe.

Are you a professional stuntman? Yes / no

If yes, please send us your resume as a JPEG file.

Please list any other special skills that you have.