

Talent Casting Form

Date _____

Pick _____

Client _____

Job name _____

Job number _____

Talent name _____

Talent phone _____

Agent phone _____

Agency/agent _____

Parent (if minor) _____

Best time of day to be reached _____

Hair color _____ Eye color _____

Height _____ Weight _____

Shirt _____ Collar _____ Sleeve _____

Dress _____ Shoe _____

Pants _____ Waist _____ Inseam _____

Hat _____ Bra _____

Are you available on _____ yes / no

Please list any date conflicts. _____

Please list any jobs you have worked on that might conflict with this client's project. _____
