

Date: ___/___/___

Union Member: Yes ___ No ___

TWINS TALENT AGENCY - Profile Sheet

please return completed profile with pictures

Performer(s) Name(s): _____

Parents(s) Name: (if child): _____

Date of Birth: _____ Identical (if twins) Yes ___ No ___

Address: _____

Street / Apartment #

City

Postal Code

Phone: _____

Home #

Cell #

Hair Colour: _____ Eye Colour: _____ Weight: _____ Height: _____

Shoe: _____ Waist: _____ Chest: _____ Hips: _____

Inseam: _____ Dress: _____ Size: _____ Hair: _____

i.e. 7/8

s/m/l/lx

braided/streaked/shaved

Skin Tone: _____

fair/olive/brown/black

Travel by: _____

car

TTC

CAR INFO: Year/Make/Colour _____ (for purposes of using on set)

Email Address: _____

Actra #: _____ SIN # _____

Special Skills: _____

(sports, musical instruments, special talents, special wardrobes etc.)

Availability: _____

(What days of the week are you available?)

(Please complete and attach current photos)

TWINS TALENT AGENCY

twinstalentagency@rogers.com / www.twinstalentagency.com

Note: as per our privacy policy, all personal information will be kept confidential and will be used solely for booking purposes.