



# Artimis Creative Group

an eye for talent

## Artimis Creative Group – Representation Details

Please complete this form in BLOCK CAPITALS, attaching current headshot, full-length picture, up-to-date CV and at least one form of identification (either passport or driving licence).

<b>Title</b>	Mr	Mrs	Miss	Ms	<b>Date of Birth</b>	
<b>Forename(s)</b>					<b>Surname</b>	
<b>Alias / Stage Name</b>						
<b>Address</b>						
<b>Town</b>						
<b>County</b>					<b>Post Code</b>	
<b>Home Tel.</b>					<b>Other Tel.</b>	
<b>Mobile Tel.</b>					<b>Fax</b>	
<b>E-Mail Address</b>					<b>Alternative E-Mail</b>	
<b>Eye Colour</b>					<b>Hair Colour</b>	
<b>Nationality</b>					<b>Hair Length</b>	

## Child Licensing Information

All children under the age of 16 years must have a license which will be granted by your local education welfare authority; without a license a child cannot work. Please be aware that you will be required to provide Artimis with a copy of your child's birth certificate, along with a note from the child's doctor certifying the child is fit and well to undertake work.

<b>School Attending</b>		<b>Local Authority</b>	
<b>Parent / Guardian</b>			
<b>Address</b>			
<b>Town</b>			
<b>County</b>		<b>Post Code</b>	
<b>Licence No.</b>		<b>Expiry Date</b>	



## Modelling

Please indicate which of the following modelling types you are interested in working in:

Photographic	<input type="checkbox"/>	Fittings	<input type="checkbox"/>	Promotions	<input type="checkbox"/>	Plus	<input type="checkbox"/>
Fashion	<input type="checkbox"/>	Catwalk	<input type="checkbox"/>	Hospitality	<input type="checkbox"/>	Market Research	<input type="checkbox"/>
Hands	<input type="checkbox"/>	Feet	<input type="checkbox"/>	Couple	<input type="checkbox"/>	Family	<input type="checkbox"/>

## Specialists

Photographer	<input type="checkbox"/>	Choreographer	<input type="checkbox"/>	Hair & Make-Up	<input type="checkbox"/>	Event Organiser	<input type="checkbox"/>
Beauty Therapist	<input type="checkbox"/>	Body Painter	<input type="checkbox"/>	Stylist	<input type="checkbox"/>		
Other	<input type="text"/>						

## The Casting Club (TCC)

Please indicate which of the following casting roles you are interested in:

Actor	<input type="checkbox"/>	TV Extra	<input type="checkbox"/>	Presenter	<input type="checkbox"/>	Narrator *	<input type="checkbox"/>
Dancer	<input type="checkbox"/>	Lookalike	<input type="checkbox"/>	Voice Over *	<input type="checkbox"/>		
Playing Age	<input type="text"/>	to	<input type="text"/>				
Spotlight Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	Equity No.	<input type="text"/>		

## Artimis Music Management (AMM)

Please indicate which of the following roles you are interested in:

Solo Artist *	<input type="checkbox"/>	Duet *	<input type="checkbox"/>	Group *	<input type="checkbox"/>
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*\* Please note: if you wish to be represented as a narrator, voice over or AMM artist we will require voice and / or sound recordings (in MP3 format) demonstrating your skills.*



## Regions

Please indicate which of the following regions you are happy to work within:

London	<input type="checkbox"/>	South-East	<input type="checkbox"/>	North-East	<input type="checkbox"/>	Scotland	<input type="checkbox"/>
East Midlands	<input type="checkbox"/>	South-West	<input type="checkbox"/>	North-West	<input type="checkbox"/>	Wales	<input type="checkbox"/>
West Midlands	<input type="checkbox"/>	Home Counties	<input type="checkbox"/>	Yorkshire	<input type="checkbox"/>	Ireland	<input type="checkbox"/>
East	<input type="checkbox"/>	Mainland Europe	<input type="checkbox"/>	North America	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>

## Accommodation

In which of the following regions do you already have accommodation?

London	<input type="checkbox"/>	South-East	<input type="checkbox"/>	North-East	<input type="checkbox"/>	Scotland	<input type="checkbox"/>
East Midlands	<input type="checkbox"/>	South-West	<input type="checkbox"/>	North-West	<input type="checkbox"/>	Wales	<input type="checkbox"/>
West Midlands	<input type="checkbox"/>	Home Counties	<input type="checkbox"/>	Yorkshire	<input type="checkbox"/>	Ireland	<input type="checkbox"/>
East	<input type="checkbox"/>	Mainland Europe	<input type="checkbox"/>	North America	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>

## Transport

Do you have your own method of transport (e.g. motorbike, car) and hold a valid licence to drive that vehicle?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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## Languages

Please indicate which of the following languages you can hold a conversation in:

English	<input type="checkbox"/>	French	<input type="checkbox"/>	German	<input type="checkbox"/>	Spanish	<input type="checkbox"/>
Italian	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Japanese	<input type="checkbox"/>	Other	<input type="checkbox"/>



### Additional Notes

Do you have any scars?			
Do you have any tattoos?			
Do you have any piercings?			
Do you have any special skills?			
Do you have an existing agent?			
National Insurance No.		Unique Tax Reference **	
Bank Account No.		Sort Code	

\*\* Please note: we will require a copy of the official letter from the tax office as proof of self-employment.

### Declaration

Please sign and date the following statement (\* delete as applicable):

**I wish to be / my child to be\* represented by Artimis and have signed terms and conditions.**

<b>Signature</b>  (Parent / Guardian if under 16)		<b>Date</b>	
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### PLEASE DO NOT MARK BELOW THIS LINE – ARTIMIS OFFICE USE ONLY

Referred By		Interviewed By			
Interview Date		OFFICE	TEL	CASTING	SCHOOL
Model T&C		Promotions T&C			
Employment Status		Schedule D			
Occupation					
Passport No.		Driving Licence No.			