

R.J.'s Casting, Inc.

Date: **Project :**

Name:

Agent:

Sag Member? Yes..... No

D.O.B. (if under 18).....

Your phone # (.....).....

Your cell phone # (.....).....

E-Mail address:

Height: Weight:

Suit / Dress:

Audition # Office use only.

Shirt / Bust: Waist:

Extra work? Yes No

Hips: Inseam:

Seen for:

Shoe: Hat:

Special Skills:

Hair color: Eye color:

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**R.J.'s Casting Inc.
www.rjscasting.com**