



# EXTRAS IRELAND APPLICATION FORM

## PERSONAL DETAILS

First Name:	Last Name:
Age:                      Date of birth:	Gender:
Mobile:	Home:
Email:	Nationality:
Address (Street/ Town/ County):	
Occupation:	PPS Number:
Have you access to a car?  Petrol or Diesel?	Car Details (colour,year,model):
Languages spoken:	Current Availability (days/hours):
Are you a member of another agency?	Emergency Contact Name/ Number:

## APPEARANCE

Body Type (Petit, Average, Tall, Large, Athletic, Strong):		Hair Length:	
		Hair Colour:	
Height (i.e 6ft 2"):		Facial Hair:	
Chest(inch)/ Bra size:		Eye Colour:	
Suit / Dress Size:		Skin Colour:	
Collar (inches):		Are you a twin?	
Waist (inches):		Tattoos YES/ NO	
Inside Leg (inches):		Piercings: YES/ NO	
Shoe (UK sizing):		Glasses: YES/ NO	

Previous Acting (if applicable, name/ date):	Previous Extra experience (most recent first):
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## SKILLS / HOBBIES

Please list any of the following:

For example:

Military Experience

Stand In/ AD work

Acting Stage/ Film

Singing

Musical Instruments (please specify)

Speaking Roles

Horse Riding Skills (please specify level)

Accents (please specify)

Sports (please specify)

Dancing (please specify)

Stage Combat / Stunts (only if qualified)

Street/ Circus Performance

Languages (please specify)

Featured Extra Role (please state)

Historical Re-enactments

I am interested in doing the following:

Modelling

Featured Extra

Voiceovers

Print

Television Dramas

Feature Film

Commercials

Promo/ Corporate Video

Soaps

Unpaid Work

## MEDICAL INFORMATION

It is your responsibility to disclose any medical conditions that you feel it is important for us to know about. Answering the following will not disqualify you from getting work. Have you:

Asthma

Heart Problems

Diabetes

Epilepsy

Special dietary needs

Mobility Issues

Other

How did you hear about Extras Ireland?:

(\*\*FOR THOSE UNDER THE AGE OF 18\*\*)

Please get Guardian or Parent to sign the following. I hereby give consent for my son/ daughter to be registered with EXTRASIRELAND.

Signature\_\_\_\_\_

Date:\_\_\_\_\_

Please tick if you do NOT wish to receive our Newsletter or additional information from us.

\*By signing below I confirm that all the above statements listed above are true and correct, and I am eligible to work in Ireland. I hereby understand and agree to the T&C's of working with EXTRASIRELAND and wish to be contacted regarding future work opportunities.

Signature\_\_\_\_\_

Date:\_\_\_\_\_