## **ACTRA**

## **APPLICATION FOR WORK PERMIT**

## **ALL PRODUCTIONS EXCEPT COMMERCIALS**

The Independent Production Agreement & Broadcast Agreements require Producers/Engagers to provide preference of audition and engagement to ACTRA members. If a Producer/Engager has made reasonable efforts to comply and has established that a person who is not a member of ACTRA is steeding that the requirements for a Production, an application for a work permit must be made to the local ACTRA office. Where ACTRA is statisfied that the requirements for a work permit under the Independent Production Agreement & Broadcast Agreements ave been satisfied, a work permit may be issued. All Canadian non-member Performers, who qualify above, will be issued up to three (3) work, permits. ACTRA invites performers to join ACTRA as Apprentice members with the first qualifying or subsequent two qualifying permits. Additional work permits will only be granted under exceptional circumstances by the ACTRA Branch/Local and pursuant to the ACTRA Constitution and By-laws.

ipapermits@actratoronto.com manitoba@actra.ca saskatchewan@actra.ca

Professional Name  Legal Name  Email  Home Address						Citizenship			(If non-resident, attach resume and photo.)	
						Mobile Phone Province				
Postal Code Country Agent's Company Name										
Date of Birth (day/month/yea	ar)		If Mino	r, name of Guard	dian					
Gender (Specify) Pronouns								SAG-AFTRA	No	Yes
Apprentice Member? No	Yes	Apprentice	Member #					EQUITY	No	Yes
PRODUCTION Please select to join ACTRA Membership								UDA	No	Yes
Agreement IPA	CBC	C - TV	CTV	UBISOFT	CIPIP	WiP	,	AIP		
Audio Code	CBC - R	ADIO	LBG	CITY-TV	OTHER	Specify:				
Production Title										
Production Company/Adher	ed Engager N	Name								
Shoot Dates						Total number of weeks/days				
dditional week on an existing engagement? No Yes Single Production						Series				
If Series, Episode Name						Episode #				
Performance Category			Ch	naracter Name/D	escription _					
Number of ACTRA Member	rs/Apprentice I	Members Auditio	ned	Names						
Engagements resu Providing deliber	ately false or	misleading info	rmation will re	o payment. Ple	ce against the	ne production an	d/or sanction	s against the ap	plicant	t.
Permit Fee	Paid by:	Performer	Agent	Produc	ction	Other	(specify) _			
Method of Payment:	Visa	Mastercard	Amex		erac	Cash	Cheq	Cheque		MT
Receipt sent via Email Only		Email Addres	s							
Credit Cardholder's Name Card #				Expiry	Date	C	;VV			
Cardholder Signature										
FOR OFFICE USE										
Production ID #					Engager ID	#				
					If an App	prentice permit:				
Attached to production due to financing/network					Is this a stunt performance?			No		
Continuing or returning character					Is this a first permit?  Yes			No No		
Recognizable Star/Cameo  Visibility in other field (i.e. dance or music)					Resume	Resume attached for non-resident? Yes  Number of days for non-resident role				
•	,	se non-resident			Number	oi uays ior non-r	canciii 1016			
		,			Number					
Accent, dialect/language, or cultural authenticity consideration Physical or Special Skill						a: Yes	No			
i iliyolodi ol op			city considerati	on	Number Qualifying Work Pel	!!				
Other (specify)	ecial Skill		·		Qualifying Work Per					
	ecial Skill	cultural authention			Qualifying Work Per Date Pro	rmit #				