



# Registration Form

CK Casting - 368 Ley St, Ilford, Essex IG1 4AE

## Child's Personal Details

Child's Name:	<input type="text"/>	Date of Birth:	<input type="text"/>
Address:	<input type="text"/>	Sex:	<input type="text"/>
	<input type="text"/>	Height(ft & ins):	<input type="text"/>
	<input type="text"/>	Eye Colour:	<input type="text"/>
Postcode:	<input type="text"/>	Hair Colour:	<input type="text"/>
Skills, Music/Drama Exams, Hobbies	<input type="text"/>		
Name of School:	<input type="text"/>	Telephone:	<input type="text"/>
School Address:	<input type="text"/>	Local Education Authority:	
	<input type="text"/>		

## Parent/Guardian Contact Details

First Parent or Guardian:	
Name:	<input type="text"/>
Telephone:	<input type="text"/>
Second Parent or Guardian:	
Name:	<input type="text"/>
Telephone:	<input type="text"/>
Third Parent or Guardian:	
Name:	<input type="text"/>
Telephone:	<input type="text"/>

**Professional or Amateur Performance Credits**

*include venues and dates*

**Stage:**

**TV:**

**Film:**

**Other**  
(voice overs;  
radio; modelling  
etc...)

**Please attach two passport sized photographs and a copy of the child's birth certificate to this form**

**I wish to register (child's name)\_\_\_\_\_ with CK Casting. I have read the terms and conditions of the agency and agree to abide by them.**

**Signed (parent or guardian)\_\_\_\_\_ Date \_\_\_\_\_**

**Please send to:**

**CK Casting  
368 Ley St,  
Ilford,  
Essex IG1 4AE**