



Client Information Form

Personal Information

Client Name Testy		Date of Birth 10/03/02	Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Other
Stage/Alt. Name(s) Mr Test		Primary Occupation Vocalist	
Street Address 123 Address Rd		City Mountain View	
State/Province /Territory CA	Zip/ Postal Code 837612	Country/Region United States	
Social Security 000-22-1928		Personal Phone 123-456-789	
Personal Email (Will be used for PaymentHub Access**) abc@gmail.com			

**PaymentHub is an online portal which will be a repository for all your payment detail and back-ups, accessible in a secure environment through your preferred internet browser. Registration is optional, but highly recommended. PaymentHub will send you an invite to register and will include yourself and any loanout companies you have.

Loanout Information

Loanout Name			
Loanout Street Address		City	
State/Province /Territory	Zip/ Postal Code	Country/Region	
Loanout Email	Loanout Phone	Tax ID #	

Payment Handling Method UTA to send payment here after processing

Please select preferred payment method	Direct Deposit* <input type="checkbox"/>	Check <input type="checkbox"/>
	If Check please indicate address:	

*Separate information form for Direct Deposit (see page 4)

Payment Remittance Information

Name	Title	Email



Client Information Form (Cont.)

Optional Information (If applicable to business)

Ethnicity					Multiracial	
<input checked="" type="checkbox"/> White	<input type="checkbox"/> Asian	<input type="checkbox"/> Middle Eastern	<input type="checkbox"/> Southeast Asian	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Prefer Not To Answer	
<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Native American	<input type="checkbox"/> Other	<input type="checkbox"/> No		

Languages

Arabic

Special Skills

Trumpet

Interests

Food

Pronouns	LGBTQ+	Veteran Status
Xe/Xim	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer Not To Answer	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Prefer Not To Answer

Social Media URLs (If applicable to business)

Facebook	
Twitter	
Instagram	
TikTok	
Twitch	
Other: _____	
Other: _____	
Other: _____	
Other: _____	