



PERFORMERS AGENCY LTD  
APPLICATION/ PERSONAL INFORMATION FORM

Name..... Age.....  
Parents/Guardians names.....  
Address..... Home Tel No.....  
..... Mobile No.....  
..... Email Address.....  
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Date of Birth.....  
Ethnic origin.....  
Which borough do you live in.....  
School Name.....  
Address.....  
Phone No: .....

Measurements in imperial & metric

Height/no shoes..... chest .....

Waist..... hips.....

Inside leg..... outside leg.....

Collar size..... Shoe UK/European.....

Hair colour (please tick)

white blonde.....golden blonde.....dark blonde.....

light brown.....mid brown.....dark brown.....black.....

red.....auburn.....strawberry blonde.....

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Eyes (please tick)

Dark brown.....brown.....hazel.....green.....

Grey.....violet.....blue..... other.....

Do you wear glasses or contact lenses.....

Teeth (please tick)

Straight.....no gaps.....small gaps.....crooked.....missing teeth.....

Mix of baby & adult.....

Do you wear a fixed brace.....

Do you wear a removable brace.....

Skin colour .....

Accent (please tick)

Essex.....london.....cockney.....public school.....other.....

Are you happy working with animals?.....

Are you unable to eat any particular food? (please state).....

Please list below your hobbies and any talents you may have i.e. play an instrument, skateboard etc

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Credit

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