



# APPLICATION FOR WORK PERMIT INDEPENDENT & BROADCAST

Fax: 416-928-2026.  
IPAPERMITS@ACTRATORONTO.COM

## APPLICANT Complete in full. Please print. You must have a work permit BEFORE working.

(If non-resident, attach resume and photo.)

Professional Name \_\_\_\_\_ Citizenship \_\_\_\_\_  
 Legal Name \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_  
 Email \_\_\_\_\_ Mobile Phone ( ) \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 City, Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Agent's Company Name \_\_\_\_\_  
 Date of Birth (day/month/year) \_\_\_\_\_ If Minor, name of Guardian \_\_\_\_\_  
 Male  Female  SIN # \_\_\_\_\_ SAG Member No  Yes   
 Apprentice Member No  Yes  Apprentice Member # \_\_\_\_\_ EQUITY Member No  Yes

## PRODUCTION

Agreement: IPA  CBC-TV  CTV  CITY-TV   
 TIP  CBC-Radio  Audio Code  Other (specify)  \_\_\_\_\_  
 Production Title \_\_\_\_\_  
 Production Company/Adhered Engager Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Production Company Address \_\_\_\_\_  
 Shoot Dates \_\_\_\_\_ Total number of weeks/days \_\_\_\_\_  
 Additional week on an existing engagement? No  Yes  Single Production  Series   
 If Series, Episode Name \_\_\_\_\_ Episode # \_\_\_\_\_  
 Performance Category \_\_\_\_\_ Character Name/Description \_\_\_\_\_  
 Number of ACTRA Members/Apprentice Members Auditioned \_\_\_\_\_ Names \_\_\_\_\_

## SIGNATURE

\_\_\_\_\_

Engagements resulting from this application are subject to all terms and conditions of agreements between ACTRA and engager organizations. Providing deliberately false or misleading information will result in a grievance against the production and/or sanctions against the applicant.

## PAYMENT Permit applications are not processed prior to payment.

Permit Fee \_\_\_\_\_ Paid by: Performer  Agent  Production  Other   
 Method of Payment: Visa  Mastercard  Interac  Cash  Cheque   
 Send receipt: by email  by mail  to : \_\_\_\_\_  
 Credit Cardholder's Name \_\_\_\_\_  
 Card # \_\_\_\_\_ Expiry Date \_\_\_\_\_  
 Cardholder Signature \_\_\_\_\_

## FOR OFFICE USE

Production ID# \_\_\_\_\_ Engager # \_\_\_\_\_  
 If a non-resident permit, why is this permit being granted?  
 Attached to production due to financing/network  
 Continuing or returning character  
 Recognizable star/cameo  
 Visibility in other field (i.e. dance or music)  
 Auditioned Canadians, chose non-resident  
 Accent or minority consideration  
 Physical or special skill  
 Other (specify) \_\_\_\_\_  
 Approved/Denied By \_\_\_\_\_ Reason For Denial \_\_\_\_\_  
 If an Apprentice permit:  
 Is this a stunt performance? Yes  No   
 Is this a first permit? Yes  No   
 Resume attached for non-resident? Yes  No   
 Number of days for non-resident role \_\_\_\_\_  
 Qualifying: Yes  No   
 Work Permit # \_\_\_\_\_  
 Date Processed \_\_\_\_\_  
 Date Approved \_\_\_\_\_