



SAG-AFTRA

**SAG-AFTRA NEW MEDIA
BACKGROUND ACTOR TAFT-HARTLEY REPORT**

Please be advised that it is the Producer's responsibility to complete this report in its entirety, or it will be returned for completion.

EMPLOYEE INFORMATION

Name: _____ SS# _____

Address: _____ Date of Birth (if minor): _____

City/State _____ Zip: _____ Phone: _____

E-mail (optional): _____

EMPLOYER INFORMATION

Name: _____ Phone: _____

Address: _____ City/State _____ Zip: _____

Check one: Casting Agency Studio Production Co. Other: _____

EMPLOYMENT INFORMATION (check one selection from each)

<u>CONTRACT TYPE</u>	<u>PERFORMER CATEGORY</u>
<input type="checkbox"/> Interactive	<input type="checkbox"/> General <input type="checkbox"/> Special Ability
<input type="checkbox"/> New Media	<input type="checkbox"/> Dancer <input type="checkbox"/> Other: _____
Work Date(s): _____	Salary: _____
Production Title: _____	Prod./Commercial #: _____
Shooting Location(s) (City/State): _____	
Reason for Hire (be specific): _____	

Authorized Employer Signature: _____ Date: _____

Print Name: _____ Phone: _____

PLEASE NOTE: TAFT HARTLEY REPORTS MUST BE RECEIVED WITHIN 15 WORKING DAYS OF THE WORKING DATE.

SEND ALL BACKGROUND TAFT HARTLEY REPORTS TO THE SAG-AFTRA NEW MEDIA DEPARTMENT AS FOLLOWS:

SAG-AFTRA NEW MEDIA DEPT.

5757 WILSHIRE BOULEVARDS, 8TH FLOOR, LOS ANGELES, CA 90036-3600

PHONE 323.549.6446 / FAX 323.549.6460