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STATION 12 INFORMATION FORM

Date _____ Caller Id _____

Contact Name _____ Product / Production _____

Co. Name _____ Ad Agency (City) / Signatory _____

Phone # _____

Fax # _____

Address _____ Production Co. Name _____

_____ Production Co. Phone _____

Location (City/State) _____ Production Type _____

SSN or SAG-AFTRA Idn	Name	Start Date	Category Codes	SAG-AFTRA Use

Explanation of Performer Category Codes

- B ▶ Background DA ▶ Dancer D ▶ Dubbing G ▶ Guest Star L ▶ Looping
- P ▶ Principal PT ▶ Puppeteer SR ▶ Series Regular S ▶ Singer ST ▶ Stunt
- V ▶ Voiceover