

Date: _____

Email address: _____

TALENT REGISTRATION

Full Name of Model					
Name of Parent (if model is under 18 years of age)					
Birth date	Age	Nationality	Sex		
			M F		
Home Address					
Mailing Address			Telephone Number		
			(W)		
			(H)		
			(FAX)		
Height	Weight	Hair Color	Eye Color	Shoe Size	
cm	kg				
Bust/Chest	Waist	Hip	Departure Date	Special Interests (Check all that apply)	
cm	cm	cm			
"See modeling booklet for conversion chart for metric measurements"					
Do you have a suit?		Do you have a driver's license?			
YES NO		YES NO			
Would you wear a bikini?		Do you know your way around Tokyo?			
YES NO		YES NO			
What languages do you speak?					
Talent, Special Skills, Hobbies:					
Modeling Experience					
Acting Experience					