



GUILD OF ITALIAN AMERICAN ACTORS (GIAA)

Application for Membership

Mailing Address: Canal Street Station, PO Box 123, NY, NY 10013--0123

E--mail Address: info@giaa.us Telephone Number: 201--344--3411

Web Site: www.giaa.us

Membership fee: \$350 Annual dues: \$60

Important Information: All applicants MUST supply a copy of a current driver's license OR other government--issued ID. The ID MUST include a photograph and date of birth. Applicants under the age of 18 must provide a letter of permission from their parent or legal guardian, as well as a copy of the parent/guardian's ID as described above, and the minor's birth certificate.

In addition to this application form, applicants must provide a current resume and headshot.

Name: _____

Date of birth: _____

Mailing address: _____

Phone number(s): _____

E-mail address: _____

Web site: _____

Agent: _____

Manager: _____

U.S. citizen (circle): Yes/No

If no, Social Security number: _____

Check all of the following that apply:

___ Actor/Actress ___ Singer ___ Dancer ___ Writer ___ Director

Circle other performing union membership: SAG/AFTRA AEA AGMA AGVA

Do you speak Italian? ___ Yes ___ No

Do you want your headshot included on the GIAA website? ___ Yes ___ No

Note: Additional fee is \$50, which includes 1 update per year.

Additional updates \$25/each

GIAA reserves the right to modify submitted material to conform to our standards. I agree to abide by the rules and regulations of the Guild of Italian American Actors.

Signature: _____ Date: _____