

**PRAIRIE STAR PRODUCTIONS  
MIDWEST RE-ENACTORS CASTING DATABASE  
REGISTRATION FORM**

REG#
FOR OFFICE USE

**Personal info:**

First Name:	
MI:	
Last Name:	
Occupation:	

**Contact Information:**

Contact Name:	
Alternative Contact Name:	
Street Address:	
City:	
State:	
Zip:	
Country:	
Home Telephone:	
Work Telephone:	
Mobile Telephone:	
Fax:	
Email:	
Web Page:	

**Characteristics:**

Gender:	
Date of Birth:	
Age:	
Height: (e.g. 5'9")	
Weight (lbs):	
Hair Color:	
Hair Length:	
Eye Color:	
Facial Hair:	

**Re-enacting Background**

Identify Who you Reenact?	<input type="radio"/> Infantry <input type="radio"/> Artillery <input type="radio"/> Cavalry / Dragoon <input type="radio"/> Field Musician <input type="radio"/> Civilian <input type="radio"/> Other (please specify):
Re-enacting Unit Affiliations	<input type="radio"/> Please List:
Expected minimum base Salary for one day (roll call to wrap)?	<input type="radio"/> \$0 - \$100 <input type="radio"/> \$100-200 <input type="radio"/> \$200-300 <input type="radio"/> Other:
Horseback Riding Skills:	<input type="radio"/> None <input type="radio"/> Basic <input type="radio"/> Expert
Stunts Experience:	<input type="radio"/> None <input type="radio"/> Basic <input type="radio"/> Expert <input type="radio"/> N/A
Are you a Professional Actor? If Yes, describe Union affiliations, if any:	<input type="radio"/> No <input type="radio"/> Yes (If Yes check affiliations:) <input type="radio"/> SAG <input type="radio"/> AFTRA <input type="radio"/> Equity <input type="radio"/> SAG Eligible <input type="radio"/> AFTRA or Equity Eligible <input type="radio"/> Non union