



Non-Stop Production



668 Greene Avenue
Brooklyn, New York 11221
Office/Studio: 718-574-8194 / Cell: 718-415-3474

Website: <http://nonstopproduction.com>
E-Mail: contactus@nonstopproduction.com

Youth Program/Talent: <http://nspyouth.org>
Membership: contactus@nspyouth.org

Wayne R. Winston, CEO/Manager

MEMBERSHIP APPLICATION

APPLICANT'S NAME: _____ DOB: ____/____/____

ADDRESS: _____ HEIGHT: _____

_____ WEIGHT: _____

PHONE #: (____) _____ TALENT: _____

SCHOOL ATTENDING: _____ GRADE: _____

PARENT or GUARDIAN'S NAME: _____

PHONE # (If different from above): (____) _____

EMERGENCY CONTACT PERSON if Parent Can Not Be Reached:

NAME: _____ ADDRESS: _____

PHONE #: (____) _____ RELATIONSHIP: _____

1. WHY WOULD YOU LIKE TO BE A PART OF NON-STOP PRODUCTION? _____

2. WHAT ARE YOUR EDUCATIONAL GOALS? _____

3. HAVE YOU ANY EXPERIENCE IN THE TALENT AREA YOU HAVE CHOSEN? IF SO, PLEASE EXPLAIN.

4. ANY COMMUNITY INVOLVEMENT? IF YES, PLEASE EXPLAIN: _____

5. ANY COMMENTS THAT YOU WOULD LIKE TO MAKE CONCERNING JOINING NSP, OR ABOUT YOURSELF. WHAT ARE YOUR EXPECTATIONS AND GOALS? WHAT DO YOU THINK YOU WILL BENEFIT BY BEING A PART OF THIS COMPANY? _____

** To accommodate all members, please specify your preferences for your talent/service area. Parents may also respond for minors if needed. Please check area (s) of interest.*

TALENT	PREFERENCE		
_____ MODEL / ACTOR	_____ Film _____ Stage	_____ Commercials _____ Commercial Photos (Magazine/Ads)	_____ Television _____ Runway Model (Fashion Shows)
_____ MUSIC	_____ VOCAL _____ R&B _____ Gospel	_____ INSTRUMENTAL _____ Hip-Hop _____ Jazz	_____ DANCE _____ Reggae
_____ YOUTH COUNCIL	_____ Outreach Services _____ Peer Counseling	_____ Communications _____ Leadership Development	_____ Education
_____ ART/DESIGN	_____ Fashion design _____ Computer graphics	_____ Scenery design	_____ Illustration
_____ AUXILARY GROUPS	_____ Double Dutch Team _____ Jazz Band	_____ Pageant Development _____ Step Team	_____ Booster
_____ PHOTOGRAPHY/ART	_____ Portraits/Models _____ Advertisements	_____ Sports	_____ Concerts
_____ GENERAL BOARD	_____ Youth Minister _____ Parent Board	_____ Fundraising _____ Board Assistants	_____ Coordinator

* Are you willing to work under a management contract? _____ YES _____ NO

COMMENTS _____

 Member's Signature

 Parent/Guardian's Signature

 Manager's Signature

____/____/____
 Date

N.S.P. Youth Employee/Reference Data

M F

____/____/____
DATE

Last Name: _____ First Name: _____

Parent/Guardian's Name: _____

Address: _____ Apt. # _____

(____) _____
Telephone #

(____) _____
Emergency #

E-Mail Address: _____

Web Address: _____

Current School: _____ Grade/Year: _____

D.O.B. ____/____/____ S.S.#: ____-____-____

Height: _____ Weight: _____ Eyes: _____ Shoe: _____ Hair: _____

Clothes size: _____ Measurements: Chest _____ Waist _____ Inseam _____

Hobbies/Skills: _____

Favorites:

Food _____ Person _____ Color _____

Game _____ Sport _____ Music _____

Other _____

Employee Signature

Parent/Guardian's Signature