YOUNG PERSON'S EMPLOYMENT

Written Consent by Parent or Guardian For employment as an actor, background performer or extra

in the Entertainment Industry

	Dates of Work:	
Date of Consent (M/D/Y)	From:	
	To:	
Information of Child:		
Name (Please print in full)	Date of Birth (M/D/Y)	
Address (Suite #/ Street/ City)	Postal Code	
Phone Number (Please include Area Code)	Alternate Phone Number	
Name and Phone Number of Talent Agency (If applicable)		
Production Information:		
Name		
Location, Hours,		

Contact Phone Numbers

Parent/Guardian Declaration:				
I am the parent of this child \Box . I am the legal \S	guardian of this child \Box .			
• I have read and am familiar with the Employment Standards Act & Regulations and Best Practices for the employment of Young People in the Entertainment Industry.				
	I agree to supervise the Child or have a Chaperone, nineteen years (19) of age or older, supervise the Child at all times while the Child is on set.			
 I am responsible for the Child's well being and safety at all times the Child is working. I understand it is my responsibility to ensure that the Child maintains the requirements of her/his educational program. I noted the specifics of Location, Hours of work and type of work (actor background performer or extra). 				
			This is my written consent for my child to Performer or Extra for a production that a Regulations and Best Practices for the emp Entertainment Industry.	adheres to the Employment Standards Act &
			Name (Please print in full)	Signature
Address (If different than Child)	Postal Code			
Phone Number (If different than Child)	Alternate Phone Number			
This Written Consent must be obtained by the pro-	oduction and retained as employment records.			

(Parent or guardian should retain a copy for own records)