



STONE ENTERTAINMENT LTD

REGISTRATION FORM

EMAIL: stoneentertainmentuk@gmail.com MOB: 07877 756 284 WEB: www.stoneentertainment.co.uk

FULL NAME:							
STAGE NAME							
TYPE OF ACT:							
FULL ADDRESS:						POSTCODE:	
TEL NO:			EMAIL ADDRESS:				
WEBSITE:	WWW.			Do you give us permission to use material from this site YES / NO			
VIDEO LINK:							
PAT TESTED:	Please provide a valid copy with this application			DATE OF EXP:			
PLI (CERTIFICATE)	Please provide a valid copy with this application			DATE OF EXP:			
PERFORMANCE FEE:	£		FLEX	YES	OR	NO	
PROFESSIONAL QUALIFICATIONS:							
INDUSTRY MEMBERSHIPS or UNIONS / ASSOCIATIONS							
TRAVEL RADIUS:							
DO YOU HAVE ANY SPECIAL DISABILITY REQUIREMENTS:							



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EXPERIENCE:				
PLEASE NOTE:	All work undertaken by our Artists is subject to a 15% Agency Fee (unless stated otherwise) and is payable within a 7 day period. *See Terms			
CANCELLATIONS:	Please note that there are fees due for cancellations of contracts. *See Terms			
URGENT	Please supply 2 good quality promo pictures of your act with this application. Email: stoneentertainmentuk@gmail.com ALL safety certificates in accordance with the Entertainment Agents Association Ltd MUST be submitted before any work will be given to the artist.			
PHOTO I.D (Please Tick)	DRIVING LISENCE	PASSPORT	OTHER	PLEASE SPECIFY
NEXT OF KIN IN CASE OF EMERGENCY:	NAME:	RELATIONSHIP:	TELEPHONE:	
NEXT OF KIN IN CASE OF EMERGENCY:	NAME:	RELATIONSHIP:	TELEPHONE:	

Full Name: _____ Signature: _____ Date: _____