



SYMPHONIC PERFORMER INFORMATION FORM

Please provide the following information as it helps us to identify sound recordings you have performed on. Please include a copy of a Government Issue photo I.D. (driver's license, passport).

Legal Name: _____

Professional Name/AKA: _____ Maiden Name: _____

Street Address: _____ City, State, Zip: _____

Social Security Number: _____ Foreign Tax I.D. Number/Country: _____

Email: _____

Telephone(s): _____ Website/bio: _____

Date of Birth: _____ Gender: Male Female Marital Status: _____

Country of: _____

Birth: _____ Residence: _____ Citizenship: _____

AFM Membership # _____ AFM Local(s) _____

Instrument(s) you play: _____

Which Symphony, Opera, Ballet or Chamber Orchestra(s) are you or have you been a member of?

List each orchestra name and your years of tenure [i.e. 1988-2013]:

Were you an extra on a Symphony, Opera, Ballet or Chamber Orchestra recording? Please supply the following information:

Orchestra name: _____

Repertoire recorded / conductor / year: _____

Orchestra name: _____

Repertoire recorded / conductor / year: _____

If you have appeared on any non-symphonic recordings, please list artist(s) and title information here: _____

If you need more space please continue on the back or add extra sheets as necessary.

Signature: _____ Date: _____

Please include a copy of a Government Issue photo I.D. (driver's license, passport)
Please make sure it is clear and legible (mail or send to SYM_DEPT@afmsagaftfund.org)

PRINT FORM - PHOTO ID & SIGNATURE REQUIRED

By signing and submitting this form, you acknowledge that you have read and agreed to the following Terms and Conditions:
I authorize both AFM & SAG-AFTRA Intellectual Property Rights Distribution Fund ("FUND") and SAG-AFTRA and Industry Sound Recordings Distribution Fund ("SRDF") to utilize my profile information where applicable for distribution purposes. Also, I understand that my information may be shared with any entity that the Fund may administer/distribute for on my behalf, now and in the future, and this authorization will remain in effect until canceled in writing, signed and dated by me.