



Last Name/Surname/Family Name _____
First Name/Given Name _____
Middle Initial/Name _____
Stage Name _____
Address Line 1 _____
Address Line 2 _____
City, State, Zip Code: _____
Web Address: _____
Home Phone Number: _____
Work Phone Number: _____
Mobile Phone Number: _____
Primary Email Address: _____
Secondary Email Address: _____
Agent/Agency: _____ **Contact Number:** _____

For a full explanation of types of membership, visit our website at www.caan.biz)

Individual & Family Memberships require submission of 6 headshots/resumes for each person appearing on the website.

1. Membership Fee \$20.00 Individual (headshot on website)
 \$30.00 Family (married couple or parents & unlimited children. Headshot(s) on website)
 \$0 Corporate/Professional non-talent

2. Signature of Applicant or Parent/Guardian (if under 18): _____

By signing this document you give CAAN permission to use your headshot and your name to promote you and CAAN.

MAIL TO: CAAN, 331 Wimbledon Drive, Roxboro, NC 27573-2812

Allow two weeks to process.

Checks payable to CAAN.

Questions? Call (336) 599-1695

The CAAN Board and Members ask that you honor your agent agreement.

Thank you for your interest.

Administrative Use only

Headshots Received: _____	Headshots Posted: _____	
Date Paid: _____	Amount Paid: _____	Card Issued: <input type="checkbox"/> Y <input type="checkbox"/> N
Member Number: _____	Notes: _____	