

AMERICAS EXTREME TALENT SINGING COMPETITION SHOW

APPLICANT CASTING APPLICATION

VENUE MIAMI

SEASON ONE SUMMER 2025

EMAIL NOWENTERTAINMENT@HOTMAIL.COM

561-872-1962

*****You must be willing to travel at your own expense and pay for your food and lodging for the show. The duration of stay auditions is 13 weeks. *****

This application is for consideration to be a participant in a reality-based talent competition television series being produced by ICAN ENTERTAINMENT PRODUCTIONS (“Producer”) whose purpose is entertainment entitled “AMERICAS EXTREME TALENT SINGING COMPETITION SHOW” A.E.T. (the “Program”). To apply, you must meet the Eligibility Requirements and complete and return all the following attached documents:

All auditions are subject to federally regulated fairness rules, and your audition should not be discussed in the press.

IF YOU MEET ALL THE REQUIREMENTS, WE WILL EMAIL YOU A ***CONFIRMATION*** EMAIL FROM THE EXECUTIVE PRODUCER TO AUDITION FOR THE SHOW. *****Please be advised that there will be further specific questionnaire documents to fill out.

Please bring this email with you and APPLICANT INFORMATION & QUESTIONNAIRE

FIRST NAME:

LASTNAME:

NICKNAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

I AM LEGALLY PRESENT IN THE U.S. WITH THE UNRESTRICTED RIGHT TO WORK FOR ANY U.S. EMPLOYER.

YES _____ NO _____

CELL PHONE:

HOME PHONE:

WORK PHONE:

EMAIL:

FACEBOOK:

SNAPCHAT:

TWITTER:

WEB SITE:

1) DO YOU PLAY ANY INSTRUMENTS?

YES _____ NO _____

GUITAR _____ PIANO _____ OTHER _____

2) ARE YOU A MEMBER OR ASSOCIATED WITH SAG-AFTRA?

YES _____ NO _____

DATES)

3) HAVE YOU EVER PERFORMED IN ANY SINGING COMPETITIONS?

YES _____ NO _____

DATES:

4) WERE THERE ANY CONTRACT(S) INVOLVED?)

YES _____ NO _____

DATES

5) HAVE YOU BEEN PROFESSIONALLY TRAINED?

YES _____ NO _____

TELL US ABOUT YOURSELF:

6)WHAT IS YOUR LEVEL OF EDUCATION?

7) WHAT SCHOOLS HAVE YOU ATTENDED?

8) WHAT DO YOU DO FOR A LIVING?

9) HAVE YOU BEEN OR ARE YOU CURRENTLY UNDER ANY RECORDING CONTRACTS?

YES _____ NO _____

ENTER DATES:

RELEASE DATES:

10) HAVE YOU BEEN OR ARE YOU CURRENTLY UNDER ANY PUBLISHING CONTRACTS?

YES _____ NO _____

TERM / DURATION OF CONTRACTS INCLUDING OPTIONS PERIOD.

1 YEAR _____ 2 YEARS _____ OTHER _____

DATES:

11) DO YOU HAVE AN AGENT?

YES _____ NO _____

NAME OF AGENT

NAME OF COMPANY

PHONE NO.

ADDRESS

EMAIL ADDRESS

12) DO YOU HAVE A MANAGER?

YES _____ NO _____

NAME OF MANAGER(S)

NAME OF COMPANY(S)

PHONE NO.

EMAIL ADDRESS:

13) ARE YOU A MEMBER OF ASCAP, BMI OR OTHERS?

YES _____ NO _____ PUBLISHER _____ COMPOSER _____ SONG WRITER _____

14) ARE YOU CURRENTLY OR HAVE YOU PREVIOUSLY BEEN A PAID PERFORMER (I.E., PAID TO PERFORM)

IN ANY OF THE FOLLOWING:

YES _____ NO _____ *.

A TELEVISION SHOW, PILOT, EPISODES AND FINALE?

CHECK HERE _____

A THEATRICAL MOTION PICTURE?

CHECK HERE _____

A VIDEOTAPED COMMERCIAL OR MUSIC VIDEO?

CHECK HERE _____

A RELEASED SOUND RECORDING?

CHECK HERE _____

PLEASE NOTE THIS DOES NOT INCLUDE AN EP UNLESS YOU WERE PAID TO PERFORM AS A SINGER
ON THE EP)

15) IN THE PAST TWO (3) YEARS HAVE YOU EVER BEEN EMPLOYED AS A PERFORMER IN A FREE, PAY OR
INTERNET STREAMING AND CABLE TELEVISION MOVIE

YES _____ NO _____

DATES

16) HAS THE TELEVISION SHOW SERIES AIRED/BEEN RELEASED?

YES _____ NO _____

DATES

17) WERE THERE ANY CONTRACT(S) INVOLVED?

YES _____ NO _____

DATES

18) IN THE PAST TWO (3) YEARS HAVE YOU EVER BEEN EMPLOYED AS A PERFORMER IN A TAPED OR FILMED COMMERCIAL EXHIBITED ON A LOCAL OR NATIONAL BASIS?

YES _____ NO _____

DATES

19) HAS THE COMMERCIAL AIRED?

YES _____ NO _____

DATES

20) WERE THERE ANY CONTRACT(S) SIGNED?

YES _____ NO _____

DATES OF CONTRACT

SIGNING _____

21) ARE YOU CURRENTLY BEING CONSIDERED FOR PARTICIPATION IN A FILM, WEB SERIES, TELEVISION SERIES OR REALITY SHOWS?

YES _____ NO _____

22) ARE THERE ANY CONTRACT(S)

SIGNED?

YES _____ NO _____

DATES

23) HAVE YOU APPLIED TO BE ON ANY TELEVISION REALITY SHOWS IN THE PAST YEAR?

YES _____ NO _____

DATES

PILOT

WHAT SEASONS

EPISODES

FINALE

24) WERE THERE ANY CONTRACT(S) INVOLVED?

YES _____ NO _____

DATES

25) LIST THE NAME OF ANY OTHER REALITY/COMPETITION TV SHOW(S) THAT YOU HAVE APPEARED ON?

WHAT ROLE DID YOU PLAY? PRINCIPAL _____ SUPPORTING _____ EXTRA _____ 26)

NAME OF NETWORK(S)

26) LIST ANY/ALL WEBSITES YOU HAVE EVER APPEARED ON, CURRENTLY OR IN THE PAST?

I represent and warrant that all information I am providing to Producer on this Application is valid, true and accurate, and that I have (or will concurrently provide) to Producer full and accurate information regarding my name (including prior names, aliases and professional/stage names), address and date of birth, for Producer's record-keeping purposes.

Signature of Applicant:

Date:

Print Name:

ADDRESS

I represent and warrant that all information I am providing to Producer on this Application is valid, true, and accurate, and that I have (or will concurrently provide) to Producer full and accurate information regarding my name (including prior names, aliases, and professional/stage names), address and date of birth, for Producer's record-keeping purposes.

AGREED AND ACCEPTED: SIGNATURE:

PHONE:

PRINT NAME:

EMAIL ADDRESS:

RESIDENCE ADDRESS:

DATE OF BIRTH:

INDIVIDUAL ACCOMPANYING MINOR (NOT PARENT OR GUARDIAN) MUST BE AT LEAST 21 YEARS OLD, BELOW, AND BRING TO AUDITION ALONG WITH A NOTARIZED "GUARDIANSHIP AND MEDICAL AUTHORIZATION FOR MINORS FORM"

I represent and warrant that I am the Individual Accompanying Minor designated by the minor's parent/guardian above. I have agreed to be responsible for the safety, health, and welfare of the minor during the audition process. In addition, for good and valuable consideration, the receipt and sufficiency which is acknowledged herein, I hereby agree to be bound by and to perform all of the terms and conditions of the foregoing Application including, without limitation, the provisions regarding the release of all claims), as such terms and conditions may relate to my possible or actual participation in the Program, if any (including but not limited to the taping of my appearance in connection with the Program and the use of my name, voice, likeness, etc.).

SIGNATURE:

DATE:

PRINT NAME:

PHONE NUMBER:

RESIDENCE ADDRESS:

EMAIL ADDRESS:
