



FORM C

Affidavit of Actor Eligibility

Colorado Community Theatre Coalition Festival

Nomad Theatre, Boulder, Colorado


July 15 - 17, 2010

Submitted by _____ **(Individual Name)**

Representing _____ **(Theatre Company)**

Date _____

To be filled out and sent by individual representing entering theatre company 

 To be filled out by actor and given to individual representing entering theatre company

I _____ hereby certify that :

- 1.** I am receiving no payment (direct or indirect) for my participation in CCTC Festival 2010 as a member of _____(Theatre Company) in the production of _____ (Production Title).
- 2.** I am not an active member of Actor's Equity at this time and will not become an active member of Actor's Equity as long as I am involved in an AACT competition eligible production.
- 3.** I will not have earned more than twenty-five percent (25%) of a living wage as income from work as an actor in live performances for the year preceding the first day of the Colorado Festival.

Signature

Print Name

Date