

ImageGenic

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Pre-Interview Questionnaire

Please answer all questions completely. A snapshot of yourself **must** be enclosed with a completely filled out questionnaire. Mail photograph and completed form to the above address. Your photograph will be returned by return mail or during the interview.

Name: _____

Address: _____

City: _____ State: _____ Zip Code : _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ e-mail Address: _____

Modeling experience: Beginner Intermediate Advanced

Are you associated with a modeling agency? Yes No

If yes, which agency: _____

What are your rates? Hourly: _____ Half Day: _____ Full Day: _____

What modeling styles are you interested in? Check all that apply.

Maxim-style fashion lingerie centerfold business artistic nude casual swimwear

Model Mayhem #: _____ MySpace page URL: _____

Hair Color: _____ Hair Length: _____ Eye Color: _____ Dress Size: _____

Height: _____ Weight: _____ Chest: _____ Waist: _____ Hips: _____ Shoe Size: _____

Other than earrings, do you have any piercings? Yes No

If yes, where are they? _____

Do you have any tatoos? Yes No

If yes, what kind and where are they? _____

Are you: Employed Full-time student Other _____

Do you have your own transportation? Yes No

Preferred times for test shoots? Weekdays Weekends Both Mornings Afternoon

Will companion attend test shoot? Yes No

signature

date