

REDEEMER PICTURES (PTY) LTD

EXTRAS RELEASE FORM

	Title: Repercussions					
Filming Dates: January 6, 2025 – February 5, 2025						
DED	SONAL INFORMATION					
	Full Name:					
•	Surname: ID Number:					
•	Date of Birth:	Age:	Gender:			
•	Race:					
•	Cell Number:	Alternative Number:				
•	Email Address:					
•	Physical Address:					
•	Place of Residence (City/Town):					
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1.	1. Do you have any pre-existing health conditions (e.g., asthma, diabetes, epilepsy, etc.)?					
	□ Yes					
	□ No					
	If yes, please specify:					

2.	Do you take any medications regularly that production staff should be aware of?				
	□ Yes				
	□ No				
	If yes, please specify:				
3.	Emergency Contact Person:				
	Relationship:				
	Contact Number:				
4.	Medical Aid (if applicable):				
	nformation is collected as a precaution for your safety. Redeemer Pictures will use it strictly for ency purposes.				
PAY	MENT & STIPEND NOTICE				
•	Extras will be paid a stipend of R300 for their participation, per day. The stipend amount will depend on the role played (<i>Extra in Atmosphere</i> or <i>Extra in Silent Bit</i>). Details of the stipend and payment terms will be communicated separately, and a Stipend Agreement Form will be signed before filming.				
PAR	ENT/GUARDIAN CONSENT (For applicants under 17 years of age)				
If the	applicant is under 17, this section must be completed by a parent or guardian:				
•	Parent/Guardian Full Name:				
•	ID Number:				
•	Contact Number:				
•	Relationship to Applicant:				
•	Required Documents: ☐ Copy of Parent/Guardian ID ☐ Copy of Minor's Birth Certificate				
Parent	/Guardian Signature: Date:				

DOCUMENTS REQUIRED

The following must accompany this form:

- 1. Copy of Applicant's ID
- 2. Half-cut Picture
- 3. **Proof of Bank Account** (e.g., letter from the bank or a stamped bank statement)

AGREEMENT AND RELEASE

I, the undersigned, confirm that:

- I understand and agree that participation as an extra does not guarantee prominent screen time or additional benefits.
- I release and hold harmless Redeemer Pictures (Pty) Ltd and its staff from any claims, injuries, or liabilities arising during my participation in filming.
- I permit Redeemer Pictures to use my likeness, image, or performance in any form associated with the film *Repercussions*.

Applicant Signature:	
Date:	
OFFICIAL USE ONLY	
Redeemer Pictures Official Name:	
Official Signature:	
Date:	

Please email the completed form and required documents to: extrasfilm7@gmail.com

Incomplete submissions will not be considered.

Note: By signing and submitting this form, you agree to the terms outlined above.