

APPLICATION/DATA FORM PERFORMER

Details performer (mandatory)

Normanumber supplied by NORMA	:	
Male/ Female	:	
Surname	:	
Initials	:	
First name(s)	:	
Stagename	:	
Date of birth	:	
Place of birth	:	
Country of birth	:	
Nationality	:	
Social security number For bankaccounts in the Netherlands only	:	
Address	:	
Zip code	:	
Country	:	
Telephone	:	
Mobile	:	
Fax	:	
E-mail	:	
IBAN number	:	
BIC number	:	
Bank account holder's name	:	
VAT-number + country	:	

Details Management of Agent

Name company	:	
Name contact	:	
Street and house number	:	
Zip code	:	
City	:	
Country	:	
Telephone	:	

NORMA
PO Box 2995
1000 CZ AMSTERDAM
The Netherlands

Mobile	:	
Fax	:	
E-mail	:	
IBAN number	:	
BIC number	:	
Bank account holder's name	:	
VAT-number + country	:	

Genre performing artist (more options are possible)

Actor	
Dancer	
Cabaret performer	
Conductor	
DJ	
Mime	
Puppetier	
Voice actor	
Variety -/circusartist	
Singer	
Musician - Instrument(s);	

Mandate;

- Regional
 Worldwide
 Worldwide except for;

- Payment to;** Performer
 Management /agent

Thus truthfully completed

On _____

in _____

_____ (signature)

NORMA
PO Box 2995
1000 CZ AMSTERDAM
The Netherlands