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This agreement must be signed in quintuplicate. The Theatre/Producer must file one copy with SDC upon execution. The Director-Choreographer must file one copy upon execution. Each party retains one copy. One copy is for the agent or attorney of employee. The Director-Choreographer shall not commence rehearsal until a fully executed copy of this Agreement has been filed with SDC. Contracts may be filed electronically.

The following constitutes our Agreement: This contract is subject to all terms and conditions of the Collective Bargaining Agreement between SDC and Regional Musical Theatres (RMT), dated March 1, 2022. 2. (Theatre/Producer) agrees to engage the services of ____ and the Artist accepts such engagement with respect to the play . The Artist's services shall be rendered during rehearsals of the play from (first rehearsal) through (opening) for a total of rehearsal days. Type of Production: Mainstage Second/Cabaret Space The play is scheduled to be performed at the following theatres on the following dates (attach Rider if more space is needed): In consideration of full and timely performance by the Artist hereunder, Theatre/Producer agrees to pay the following: A. COMPENSATION \$ for up to seven or days of rehearsal __ for _____ additional rehearsal days at \$_____ per day \$ __Total Salary Theatre/Producer is authorized to send salary to: B. ROYALTIES: \$_____ per performance week, for _____weeks, beginning week ending____ through week ending______. (For mainstage activity, indicate on Rider any weeks in which there are fewer or more than eight performances.) C. PER DIEM \$ per day D. HOUSING AND TRANSPORTATION: Effective immediately, the undersigned assigns to the SDC, three percent (3%) of all monies earned and to be earned as Director and/or Choreographer of the above named production and authorizes and directs the Theatre to deduct such amounts and remit same to the SDC. This assignment shall be irrevocable for the term of the above named production Theatre/Producer shall make pension and health contributions to the SDC-League Pension Fund and the SDC-League Health Fund as specified in the Collective Bargaining Agreement indicated above. Riders (attach to each copy as needed) Any dispute arising out of this Agreement shall be settled by arbitration pursuant to the agreement indicated above. Accepted: Theatre must sign contract first. DIRECTOR/CHOREOGRAPHER THEATRE/PRODUCER (Signature) ____ (Signature) (Please type name)_____ (Please type name)_____ Address _____ _____ Zip _____ _____Zip _____ Employer Federal I.D. No. Email Address____

Employer Email Address____

Member of SDC YES

NO