

# SDC DIGITAL STAGE PRODUCTION I gU Y Form

Employer submitting form: \_\_\_\_\_

Production: \_\_\_\_\_

Employee (SDC Member): \_\_\_\_\_

First Presentation Date: \_\_\_\_\_

Initial Streaming End Date: \_\_\_\_\_

Additional Streaming Period(s) (if applicable): \_\_\_\_\_

D'Unzfa 'cf' @WUjcb'cZDfYgYbHUjcb#GfYUa . SSSSSSSSSSSSSSSSSSS

Bi a VYf'cZ5 HfYbXYyg#GfYUa g. SSSSSSSSSSSSSSSSSSS

HjW\_YhF Yj Ybi Y (if applicable). SSSSSSSSSSSSSSSSSSS

Hhird-Party Production Company (if applicable). SSSSSSSSSSSSSSSSSSS

Please email this form and the cumulative box office statement/attendance report, if applicable, to [Contracts@SDCweb.org](mailto:Contracts@SDCweb.org) no later than ten (10) days following each additional four (4) week streaming window.