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This contract must be signed and filed with SDC. Attach all riders to each copy. The Theatre and the Director/ Choreographer each must file one copy of this contract and any riders with SDC within five business days after signing or prior to the first rehearsal, whichever first occurs. This contract may be filed electronically by sending to Contracts@SDCweb.org or emailing your designated Contract Affairs Representative.

The following constitutes our Agreement:

1. This contract is subject to all terms and conditions of the Collective Bargaining Agreement between SDC and Outdoor Musical Stock Theatres (OMS), dated February 1, 2024 (the "CBA"), and binds the Theatre/Producer to its terms for its duration.

2.	Theatre agrees to engage the services of (Artist)	as	as		
	and Artist accepts such engagement with respect to the play entitled:				
	Artist's services shall be rendered during rehearsals of the play from	through	for		
	total ofrehearsal days.	(starting date)	(opening performance)		

- 3. The play is scheduled to be performed at the following theatres on the following dates (attach Rider if more space is needed):
- 4. In consideration of full and timely performance by Artist hereunder, Theatre/Producer agrees to pay Artist the following:

A. Salary		B. Royalties	
\$	_ for up to ten days of rehearsal	\$ per performance week, for	weeks,
\$	_ for days of rehearsal	beginning week ending	_through week
	in excess of ten at \$per day	ending	
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\$_____Total Salary

Theatre/Producer is authorized to send salary and royalty to:

- 5. Artist authorizes Theatre to deduct three percent (3%) assessments from all monies earned under this Agreement, and the Theatre shall remit same to SDC as specified in the CBA indicated above.
- 6. Theatre/Producer shall make pension and health contributions to the SDC-League Pension Fund and the SDC-League Health Fund as specified in the CBA indicated above.
- 7. Riders (attach to each copy as needed):
- 8. Any dispute arising out of this Agreement shall be settled by arbitration pursuant to the CBA indicated above.

DIRECTOR/CHOREO	GRAPHER			THEATRE/PRODUCER (Theatre must sign contract first)		
(Signature) (Please type name) Date				By (Signature)		
				(Please type name) Date		
		Zip				
Phone			Social		Zip	
Security No				Phone		
Email Address				Email Address		
Member of SDC	Yes	No		Employer Federal I.D. No		