



SDC TIER CONTRACT Extension Form

Employer shall make a minimum payment of six percent (6%) of the contractual fee for each week of performance (proratable based on 7 performances) beyond the original closing date. Additional pension (10%) and health (9%) payments are due on any extension payments and must be paid as same accrues. Extension payments and benefits shall be due to the Artist and SDC along with this form no later than ten (10) days following the extended closing date.

Theatre : _____

Production: _____

SDC Member: _____

First Rehearsal: _____ **First Performance:** _____ **Original Closing:** _____

Extension Period: _____ **through** _____

Fee on Contract: \$ _____

**Minimum Per-Performance
Extension Payment:** \$ _____ **In no case shall such payment be
less than \$20 per performance.**

**Total # of
Extended Performances:** _____

**Total Minimum
Extension Payment Due:** \$ _____

**Total Extension
Payment Paid:** \$ _____

**Total Additional
Pension Due:** \$ _____

**Total Additional
Health Due:** \$ _____

Employer Signature: _____

Date: _____

Please email this form to Contracts@SDCweb.org as soon as an extension is announced.

Pension and Health contributions must be separate checks made out to each fund and mailed to the following address: *SDC-League Pension & Health Funds 321 W 44th Street Suite 804 New York NY 10036*