



ACTRA

COMMERCIAL ENGAGEMENT CONTRACT

THIS PART TO BE COMPLETED PRIOR TO PRODUCTION

CONTRACT NO: **04-XXXXX**
BRANCH CODE

AGENCY	(NAME OF ENGAGER)	(AGENCY PRODUCER)
ADDRESS		
SPONSOR		
PRODUCT		
PRODUCTION HOUSE	CHECK IF PAYING SESSION FEE <input type="checkbox"/>	
ADDRESS		
CONTRACTS WITH	(PERFORMING COMPANY WHERE APPLICABLE)	
TO SUPPLY THE SERVICES OF	(PERFORMER'S NAME)	
(PERFORMER'S ADDRESS) INCLUDE CITY / POSTAL CODE	(TELEPHONE NUMBER)	
SOCIAL INSURANCE NO.	G.S.T./H.S.T. No.	
FULL MEMBER NUMBER	Q.S.T. No.	
APPRENTICE OR NON-MEMBER WORK PERMIT NUMBER	IN THE PERFORMANCE CATEGORY*	

MINOR UNDER 18 (SEE SECTION 16) PERFORMER'S AGENT

DATE OF BIRTH

NUMBER OF NATIONAL COMMERCIALS	TV	RADIO	TAGS	TV	RADIO	REGIONAL CHANGES	TV	RADIO		
DEMO COMM.	TV	RADIO	PRESENTATION DEMO	SEASONAL COMM.	TV	RADIO	DEALER COMM.	TV	RADIO	
PUBLIC SERVICE ANNOUNCEMENT	TV	RADIO	LOCAL & REGIONAL ADDENDUM	CAT. NO.	TV	RADIO	LOCAL & REGIONAL SHORT LIFE	CAT. NO.	TV	RADIO
SHORT LIFE ADDENDUM	7 DAYS	14 DAYS	31 DAYS	45 DAYS	CHANGES	7 DAYS	14 DAYS	31 DAYS	45 DAYS	CHANGES
MADE FOR INTERNET	FROM BROADCAST TO INTERNET		INFOMERCIAL	TV	RADIO	DOUBLE SHOOT	JOINT PROMOTION			
SAG-ARTICLE 2404A (CDN \$)			SAG-ARTICLE 2404B (USA \$)							
USE IN OTHER COUNTRIES 2405						2406		OTHER**		
SPECIFY:						DOCKET NUMBER				
COMMERCIAL NAME OR NUMBERS						(INSERT DETAILS OF FEES ABOVE MINIMUM WHERE APPLICABLE: OR "MINIMUM FEES")				
SESSION FEES-			RESIDUAL FEES-			OTHER FEES-				
THIS CONTRACT IS SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE NATIONAL COMMERCIAL AGREEMENT FOR PERFORMERS IN TELEVISION AND RADIO COMMERCIALS NEGOTIATED BY ACTRA AND THE ICA/ACA.										
PERFORMER'S SIGNATURE						DATE				
PRODUCER'S SIGNATURE						DATE				
SIGNATURE FOR PERFORMING COMPANY						DATE				
WORK REPORT: IT IS IMPORTANT THAT THE FOLLOWING REPORT BE COMPLETED AT THE END OF PRODUCTION AND FORWARDED TO ACTRA WITHIN 48 HOURS TO ENSURE PROPER PAYMENT. MEMBERS CAN BE FINED FOR FAILURE TO FILE THIS REPORT.										

DATE	TRAVEL TIME		CALL TIME	MEAL TIME		FINISH TIME	TRAVEL TIME		DATE	CALL TIME	FINISH TIME
	FROM HOME	TO LOCATION		FROM	TO		FROM LOCATION	TO HOME			
									WARDROBE CALL	<input type="checkbox"/>	
									AUDITION CALL	<input type="checkbox"/>	
									HOLDING CALL	<input type="checkbox"/>	
									SUBSTANTIAL SNACK	YES <input type="checkbox"/>	NO <input type="checkbox"/>

PLEASE NOTE THAT PAYMENT FOR THIS WORK SESSION MUST BE RECEIVED IN THE ACTRA OFFICE NOT LATER THAN 15 WORKING DAYS AFTER COMPLETION OF THE WORK SESSION IN ORDER TO AVOID LATE PAYMENT PENALTIES. SESSION AND RESIDUAL FORMS SUPPLIED BY ACTRA UPON REQUEST MUST BE USED WHEN SUBMITTING PAYMENTS. **ACTRA DOES NOT INVOICE FOR SESSION AND RESIDUAL FEES.**

PERFORMER'S PLEASE INITIAL IN THE BOX

AGREE DISAGREE

WITH THIS CONTRACT INDICATE WHICHEVER APPLICABLE

ENGAGER'S REPRESENTATIVE'S INITIALS _____



PLEASE PRINT CLEARLY

ENGAGER'S COPY

COMPLETION:

- o TYPE OR PRESS FIRMLY WHEN USING A BALL POINT PEN.
- o ALL PORTIONS OF SECTION "A" TO BE COMPLETED PRIOR TO PRODUCTION.
- o SECTION "B", THE WORK REPORT, MUST BE COMPLETED AT THE END OF PRODUCTION AND FORWARDED TO ACTRA WITHIN 48 HOURS.

OPERATION:

- o (1) WHEN SECTIONS "A" AND "B" ARE COMPLETE, GRASP THE COMPLETE SET AT LEFT AND REMOVE STUB AND CARBONS FROM ALL PARTS AND ENVELOPE.

MAILING:

- o FOLD ACTRA COPY TO FIT ENVELOPE SUPPLIED.
- o REMOVE PROTECTIVE TAPE FROM THE INSIDE FLAP, FOLD OVER AND PRESS FLAP FIRMLY.
- o MAKE SURE THAT THE FLAP IS COMPLETELY SECURE AND SEALED BEFORE MAILING.

COPY DISTRIBUTION:

- o ENGAGER RETAINS PART ONE (1)
- o PERFORMER RETAINS PART TWO (2)
- o PART THREE (3) FORWARD TO ACTRA IN THE ATTACHED ENVELOPE

MAIL PART THREE (3) ONLY

PERFORMANCE CATEGORIES *

- | | | |
|---------------------------|----------------------------------|--------------------------|
| PRINCIPAL (PP) | UNDERSTUDY (US) | PUPPETEER (PT) |
| SILENT ON CAMERA (SOC) | GROUP BACKGROUND PERFORMER (GBP) | CARTOONIST (C) |
| VOICE OVER (VO) | SOLO SINGER (SS) | STUNT COORDINATOR (ST/C) |
| DEMONSTRATOR (DEMO) | GROUP SINGER (GS) | STUNT PERFORMER (ST) |
| BACKGROUND PERFORMER (BP) | SOLO DANCER (SD) | SINGLE VOICE (SV) |
| STANDBY (SB) | GROUP DANCER (GD) | MULTIVOICE (MV) |
| STANDIN (SI) | SPECIALTY ACT (SA) | |

OTHER PRODUCTION **

- BILLBOARD
- OTHER MEDIA
- SPECIALTY AND CABLE TELEVISION
- VIDEO CASSETTES/VIDEO DISC/CD-ROMS

ACTRA BRANCH CODES:

- | | | | | |
|--------------------|----------------|------------|------------------|----------------|
| V BRITISH COLUMBIA | C CALGARY | W MANITOBA | O OTTAWA | H MARITIMES |
| E EDMONTON | S SASKATCHEWAN | T TORONTO | M MONTREAL | N NEWFOUNDLAND |
| | | | EASTERN REGIONAL | |