



PERFORMER CONTRACT/ENGAGER LETTER OF ADHERENCE TO THE CODE OF FEES AND CONDITIONS FOR FREELANCE PERFORMERS IN AUDIO RECORDINGS.

DATE DAY MO. YR.

ENGAGER (NAME OF FIRM) ADDRESS:

PHONE NO. ENGAGER NO. (OFFICE USE ONLY)

CONTRACTS WITH (PERFORMING COMPANY - WHERE APPLICABLE) TO SUPPLY THE SERVICES OF

PERFORMER: (NAME) ADDRESS:

S.I.N. ACTRA MEM. NO.

GOODS AND SERVICES TAX PERFORMER IS REGISTERED G.S.T. NO. IS NOT REGISTERED APPLICABLE G.S.T. IS PAYABLE DIRECTLY TO THE PERFORMER BASED ON (A) BELOW

SECTION 1. LETTER OF ADHERENCE:

THE ENGAGER NAMED ABOVE HEREBY ACKNOWLEDGES RECEIPT OF THE ACTRA CODE OF FEES, RATES AND CONDITIONS FOR PERFORMERS IN AUDIO RECORDINGS. THE UNDERSIGNED, AS A DULY AUTHORIZED REPRESENTATIVE OF THE ENGAGER, HEREBY AGREES TO BECOME A SIGNATORY TO THE ACTRA CODE OF FEES, RATES AND CONDITIONS FOR PERFORMERS IN AUDIO RECORDINGS AND FURTHER AGREES TO ABIDE BY AND CONFORM TO ALL TERMS AND CONDITIONS CONTAINED IN THE AFOREMENTIONED CODE.

(Signature of Representative of Engager)

SECTION 2. PERFORMER CONTRACT:

THE ENGAGER HEREBY AGREES TO ENGAGE THE ABOVE NAMED PERFORMER IN THE PERFORMANCE

CATEGORY OF TO RECORD (SPECIFY NO. OF RECORDINGS IN APPROPRIATE BOX)

SLIDE FILM FILM STRIP COMMERCIAL RECORDING FOR RETAIL SALE LONG PLAYING REPERTOIRE RECORDING AUDIO CASSETTE, DISC OR SIMILAR RECORDING LOCAL RADIO PROGRAM SYNDICATED RADIO PROGRAM

SOUND TRACK FOR OTHER (SPECIFY)

TITLE OF RECORDING (IF ANY) LENGTH OF RECORDING

FEE PER RECORDING \$ WORK HOURS INCLUDED IN FEE SPECIFIED

SPONSOR (IF ANY) PRODUCT (IF ANY)

INTENDED USE OF RECORDING

SPECIAL PROVISIONS: (WHICH SHALL NOT BE LESS FAVOURABLE THAN THE TERMS OF THE ACTRA CODE)

THIS CONTRACT OF ENGAGEMENT IS SUBJECT TO THE TERMS, RATES AND CONDITIONS OF THE ACTRA CODE FOR FEES, RATES AND CONDITIONS FOR FREELANCE PERFORMERS IN AUDIO RECORDINGS, AND SHOULD ANY PROVISION OF THIS CONTRACT BE LESS FAVOURABLE TO THE PERFORMER THAN THE MINIMUM PROVISIONS OF THE CODE, THE ENGAGER AGREES TO RECTIFY SUCH CONDITION TO CONFORM TO THE AGREEMENT REFERRED TO ABOVE.

(Signature of Representative of Engager)

(Signature of Performer)

SECTION 3. REMITTANCE STATEMENT

DATE(S) WORKED DAY 1-31, MONTH 1-12, YEAR HOURS WORKED

- (A) GROSS FEE
(B) LESS: 4% PERFORMER DEDUCTION FROM GROSS FEE (A) TO ACTRA INSCE. AND RETIRE. PLAN
(C) NET FEE PAYABLE TO PERFORMER - NET (A) LESS (B)
(D) 9% ENGAGER CONTRIBUTION OF GROSS FEE TO ACTRA INSCE. AND RETIRE. PLAN
(E) TOTAL PAYABLE TO ACTRA INSCE. AND RETIRE. PLAN 13% OF GROSS FEE - TOTAL (B) PLUS (D)
(F) STEWARDING FEE PAYABLE TO ACTRA OF 1% OF GROSS FEE (OR \$2.00 PER PROGRAM) WHICHEVER IS GREATER
(G) G.S.T. PAYABLE TO ACTRA ON STEWARDING FEE (F)
(H) PAYABLE TO ACTRA ON STEWARDING FEE PLUS G.S.T. (F + G)

INFORMATION ON HOW TO COMPLETE FORM

1. Please print with pen (except where asked for signature).
2. Press heavily (you are making 5 copies).
3. Where boxed answer spaces are provided, each letter or number must be enclosed within a box as in the example below.

PERFORMER: J, O, H, N, J, D, O, E, , , ADDRESS: 1, 0, 6, F, I, R, S, T, S, T, R, E, E, T, , ,
A, N, Y, T, O, W, N, P, R, O, V, M, 1, M, 2, X, 2

4. Where date is requested, complete information as shown below.

DAY MO. YR.
0, 1, 0, 2, 7, 6

5. **DO NOT WRITE IN THE GREY SHADED AREA.** This is for Office Use Only.

OFFICE LOCATIONS - ACTRA

BRITISH COLUMBIA	<ul style="list-style-type: none"> - Union of B.C. Performers 400 - 856 Homer Street Vancouver, BC V6B 2W5 e-Mail: info@ubcp.com 	TEL: 604-689-0727 FAX: 604-689-1145
CALGARY (Western Regional)	<ul style="list-style-type: none"> - Ste. 260, 1414 - 8th St. S.W. Calgary, AB T2R 1J6 e-Mail: calgary@actra.ca 	TEL: 403-228-3123 FAX: 403-228-3299
EDMONTON	<ul style="list-style-type: none"> - Ste. 302, 10324 82nd Avenue Edmonton, AB T6E 1Z8 e-Mail: edmonton@actra.ca 	TEL: 780-433-4090 FAX: 780-433-4099
SASKATCHEWAN	<ul style="list-style-type: none"> - Ste. 212, 1808 Smith St., Regina, SK S4P 2N4 e-Mail: saskatchewan@actra.ca 	TEL: 306-757-0885 FAX: 306-359-0044
MANITOBA	<ul style="list-style-type: none"> - Ste. 110, 388 Donald St. Winnipeg, MB R3B 2J4 e-Mail: manitoba@actra.ca 	TEL: 204-339-9750 FAX: 204-947-5664
TORONTO	<ul style="list-style-type: none"> - Ste. 200, 625 Church St. Toronto, ON M4Y 2G1 e-Mail: info@actratoronto.com 	TEL: 416-928-2278 FAX: 416-928-2852
OTTAWA	<ul style="list-style-type: none"> - Ste. 170, 2 Daly Avenue Ottawa, ON K1N 6E2 e-Mail: ottawa@actra.ca 	TEL: 613-565-2168 FAX: 613-565-4367
MONTREAL (Eastern Region)	<ul style="list-style-type: none"> - Ste. 530, 1450 City Councillors St. Montreal, QC H3A 2E6 e-Mail: montreal@actra.ca 	TEL: 514-844-3318 FAX: 514-844-2068
MARITIMES	<ul style="list-style-type: none"> - Ste. 103, 1660 Hollis Street Halifax, NS B3J 1V7 e-Mail: maritimes@actra.ca 	TEL: 902-420-1404 FAX: 902-422-0589
NEWFOUNDLAND & LABRADOR	<ul style="list-style-type: none"> - Ste. 324, 354 Water Street P.O. Box 575 St. John's, Nfld A1C 5H3 e-Mail: newfoundland@actra.ca 	TEL: 709-722-0430 FAX: 709-722-2113
ACTRA FRATERNAL BENEFIT SOCIETY	<ul style="list-style-type: none"> - 1000 Yonge St. Toronto, ON M4W 2K2 e-Mail: benefits@actrafrat.com 	TEL: 416-967-6600 1-800-839-9513 FAX: 416-967-4744
ACTRA PERFORMERS RIGHTS SOCIETY (PRS)	<ul style="list-style-type: none"> - Ste. 300, 625 Church St. Toronto, ON M4Y 2G1 e-Mail: prs@actra.ca 	TEL: 416-489-1311 FAX: 416-489-1040