



UNITED SCENIC ARTISTS • LOCAL USA 829 • IATSE

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2012-2017 LEAGUE OF RESIDENT THEATRES COVER SHEET – A+ STAGES – ASSISTANT DESIGNER’S AGREEMENT

This Cover Sheet must be signed and submitted in triplicate. Attach all Riders to each copy. Within seven (7) business days after the receipt of the signed copy from the Assistant Designer, the Theatre will file one copy with the Union.

I. AGREEMENT: Pursuant to the Agreement between the League of Resident Theatres and United Scenic Artists, the Theatre engages the Assistant Designer, and the Assistant Designer agrees to the terms herein described.

NAME OF ASSISTANT: _____

NAME OF THEATRE: _____

NAME OF STAGE: _____

ASSISTANT TO DESIGNER OF: SCENERY COSTUMES LIGHTING SOUND

NAME OF DESIGNER: _____

NAME OF PRODUCTION: _____ **OPENING ON OR ABOUT** _____

RIDER ATTACHED? Yes No

II. COMPENSATION:

The Theatre agrees to pay the Assistant Designer a weekly salary of: \$ _____, for up to _____ weeks.

Employment shall commence on: _____ and terminate on or about: _____

Employment does not have to be continuous.

The above sum may be pro-rated per day at 1/6th the weekly rate, but in no event less than the daily rate if the Assistant is being paid at Union scale. Work on the 7th day shall be paid at one and one half times one sixth (1/6) of the weekly rate. All work on the 7th day must be approved by the Theatre.

III. GENERAL PROVISIONS: Both the Theatre and the Assistant Designer agree that each and every applicable provision contained in the Agreement between the League of Resident Theatres and United Scenic Artists, Local USA 829, shall be part of this Cover Sheet, as though set forth herein at length, and that they have read said Agreement which sets forth the minimum conditions under which the Assistant Designer may work for the Theatre. No Assistant Designer or Theatre may waive or alter any of the provisions of said Agreement without the written approval of the Union, except that nothing in the Agreement shall preclude an Assistant Designer from obtaining better terms and conditions than are therein provided. This provision is of the essence of the Agreement. Additional terms shall be placed in a Rider attached to this Cover Sheet and shall be deemed a part hereof.

DUES CHECK-OFF AUTHORIZATION: I, the undersigned, herewith authorize my employer to deduct from all monies earned the administrative union dues assessed at 2% of gross wages, and direct that amounts so deducted be sent directly to the Financial Secretary of United Scenic Artists for and on my behalf.

ACCEPTED by Assistant Designer:

ACCEPTED for Theatre by:

SIGNATURE _____
SOCIAL SECURITY NUMBER _____

SIGNATURE _____
PRINT NAME AND TITLE _____

(Required if this is your first LORT contract)

STREET ADDRESS _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

E-MAIL ADDRESS _____

E-MAIL ADDRESS _____

PHONE _____

PHONE _____

SIGNING DATE _____

SIGNING DATE _____

ACCEPTED by United Scenic Artists, Local USA 829, IATSE:

NAME _____ DATE _____ USA 829 CONTRACT # _____