



**UNITED SCENIC ARTISTS • LOCAL USA 829 • IATSE**

29 West 38th Street • 15th Floor • New York, NY 10018 • Phone: 212-581-0300 • Fax: 212-977-2011  
111 N. Wabash Avenue • Suite 2107 • Chicago, IL 60602 • Phone: 312-857-0829 • Fax: 312-857-0819  
6363 Wilshire Blvd • Suite 400 • Los Angeles, CA 90048 • Phone: 323-965-0957 • Fax: 323-272-3130

**2012-2017 LEAGUE OF RESIDENT THEATRES COVER SHEET – STANDARD INDIVIDUAL DESIGNER’S AGREEMENT**

*This Cover Sheet must be signed and submitted in quadruplicate. Attach all Riders to each copy. The Theatre will fax a copy of the Cover Sheet and all Riders to the Union simultaneously with delivery to the Designer. Within seven (7) business days after the receipt of the signed copy from the Designer, the Theatre will file one copy with the Union. The Designer shall not be required to furnish any designs until the Cover Sheet has been executed by the Theatre.*

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

**NAME OF THEATRE:** \_\_\_\_\_ **LORT STAGE CATEGORY:**  
**NAME OF STAGE:** \_\_\_\_\_  A+  A  B+  B  
**NAME OF DESIGNER:** \_\_\_\_\_  C-1  C-2  D  
**DESIGN CATEGORY:**  SCENERY  COSTUMES  LIGHTING  SOUND

**NAME OF PRODUCTION:** \_\_\_\_\_  
**DATE OF FIRST REHEARSAL:** \_\_\_\_\_ **FIRST PUBLIC PERFORMANCE:** \_\_\_\_\_ **PRESS OPENING:** \_\_\_\_\_ **FINAL PERFORMANCE:** \_\_\_\_\_

**DATES IN RESIDENCE:** The Designer shall be in residence for \_\_\_\_\_ days, including tech period, which shall be from: \_\_\_\_\_ to: \_\_\_\_\_

**REIMBURSABLE EXPENSE BUDGET:** \$ \_\_\_\_\_  
**IS RIDER ATTACHED?**  Yes  No **WILL PRODUCTION TRANSFER TO ANOTHER THEATRE(S)?**  Yes  No  
*If YES, specify in Rider*

**II. COMPENSATION:**

The Theatre agrees to pay the Designer the fee of: \$ \_\_\_\_\_, payable according to the following schedule:  
A. \$ \_\_\_\_\_ (1/4) - Payable upon signing of this Cover Sheet.  
B. \$ \_\_\_\_\_ (2/4) - Payable upon acceptance of the full set of drawings, sketches and/or specifications sufficient to begin execution of the design as set forth in the rider required under Article VIII (B).  
C. \$ \_\_\_\_\_ (1/4) - Payable on the scheduled termination date: \_\_\_\_\_

**III. GENERAL PROVISIONS:** Both the Theatre and the Designer agree that each and every provision contained in the basic 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 Designer may work for the Theatre. No 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 a 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.

**ACCEPTED by Designer:**  
SIGNATURE \_\_\_\_\_  
SOCIAL SECURITY NUMBER \_\_\_\_\_  
*(Required if this is your first LORT contract)*  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
E-MAIL ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_  
SIGNING DATE \_\_\_\_\_

**ACCEPTED for Theatre by:**  
SIGNATURE \_\_\_\_\_  
PRINT NAME AND TITLE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
E-MAIL ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_  
SIGNING DATE \_\_\_\_\_

**ACCEPTED by United Scenic Artists, Local USA 829, IATSE:**  
NAME \_\_\_\_\_ DATE \_\_\_\_\_ USA 829 CONTRACT # \_\_\_\_\_