



UNITED SCENIC ARTISTS • LOCAL USA 829 • IATSE
2024-2028 LEAGUE OF RESIDENT THEATRES COVER SHEET
ASSISTANT DESIGNER'S AGREEMENT

This Cover Sheet must be signed and submitted, with all Riders attached, to livedesignjob@usa829.org. 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: _____

DESIGN CATEGORY: SCENERY COSTUMES LIGHTING SOUND

NAME OF PRODUCTION: _____ DATE OF OPENING: _____

EMPLOYMENT SHALL COMMENCE ON: _____ AND TERMINATE ON OR ABOUT: _____

RIDER ATTACHED? YES NO REIMBURSABLE EXPENSE BUDGET: \$ _____

II. COMPENSATION: The Assistant Designer's compensation shall be negotiable between the Theatre and the Assistant Designer. The Theatre and the Assistant Designer agree to the following compensation and payment schedule/structure:

III. BENEFITS: The Theatre shall make full Pension and Welfare contributions under Article 11 of the Agreement between the League of Resident Theatres and United Scenic Artists, Local USA 829 based on the negotiated compensation.

IV. BILLING: The Assistant Designer shall receive billing in the program.

V. INDEMNIFICATION: The Theatre will indemnify, defend, save, and hold the Assistant Designer, their agents, heirs, executors, administrators, and assigns harmless from and against any and all liability, charges, costs, expense claims, and/or other loss whatsoever, including reasonable attorney fees, which the Assistant Designer may suffer by reason of the designs furnished hereunder. The Theatre agrees to carry comprehensive General Liability Insurance applicable to any claims that might arise due to any work performed under this Agreement.

VI. MINIMUM CONDITIONS: Both the Theatre and the Assistant Designer agree that the following provisions 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 provisions which set forth minimum conditions under which the Assistant Designer may work for the Theatre: Article 7, Equity, Diversity, Inclusion, and Access / Non-Discrimination, Anti-Harassment; Article 13, Union Dues (Check Off); Article 16, Transportation; Article 17, Housing; Article 18, Reimbursable Expenses; Article 21, Safety and Health; Article 26(D), Union Security for Non-staff Assistant Designers; Article 27, Grievance and Arbitration; and Article 28, No Strike – No Lockout.

VII. GENERAL PROVISIONS: No Assistant Designer or Theatre may waive or alter any of the provisions of this Cover Sheet without the written approval of the Union, except that nothing in the Cover Sheet 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 the Theatre 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, 111 N. Wabash, Suite 2107, Chicago, IL, 60602, for and on my behalf.

ACCEPTED by Assistant Designer:

Design Membership Candidate? YES NO

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 # _____