

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA

(HEREIN CALLED "FEDERATION")

CONTRACT

| THIS | CONTRACT for the personal | services of musicians of | on the engagement described believed the control of the engagement described believed to the control of the con | ow is made this da | | | | | |
|---|---|---------------------------------|--|-----------------------------------|--|--|--|--|--|
| | cian or musicians. | between the undersign | ned purchaser of music (herein calle | ed Purchaser) and the undersigne | | | | | |
| | Name and address of place of engagement: | | | | | | | | |
| 1. | Traine and address of place of engagement. | | | | | | | | |
| | Name of Band/Group: | | # of Musicians: | # of Vocalists: | | | | | |
| 2. | | | | | | | | | |
| 3 | | | | | | | | | |
| | Compensation agreed upon: \$_ | | | | | | | | |
| | Purchaser will Make Payments as follows: | | | | | | | | |
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| | Deposits are nonrefundable. | | | | | | | | |
| | Either party may cancel this contract by giving the other party written notice at least four weeks prior to engagement. | | | | | | | | |
| 8. | No performance on the engagement shall be recorded, reproduced, or transmitted from the place of performance, in any manner or means whatsoever, in the absence of a specific written agreement with the Federation relating to and permitting such a | | | | | | | | |
| | recording, reproduction, or transmission. The Federation may enforce this prohibition in any court of competent jurisdiction. | | | | | | | | |
| 9. | | | ein, may be enforced by the Purcha | | | | | | |
| | musician who is a party to this contract or whose name appears on the contract or who has, in fact, performed the engagement | | | | | | | | |
| | contracted for (herein called "Participating Musician(s)"), and by the agent or agents of each Participating Musician, including | | | | | | | | |
| | the Local Union. It is expressly understood by the Purchaser and the musician(s) who are parties to this contract that neither the Federation nor the Local Union are the parties to this contract in any capacity except as expressly provided in 9 above, and | | | | | | | | |
| therefore, that neither the Federation nor the Local Union shall be liable for the performance or breach of any provise | | | | | | | | | |
| 10. | 0. A representative of the Local Union shall have access to the place of engagement covered by this contract for purposes of | | | | | | | | |
| | communicating with the musician(s) performing the engagement and the Purchaser. | | | | | | | | |
| 11. | 1. PENSION: Pension contributions to the American Federation of Musicians and Employer's Pension Fund with respect to the | | | | | | | | |
| services described herein shall be payable solely in accordance with the terms and conditions of a collective barga agreement or participation agreement between the employer of the musicians providing services under this contra | | | | | | | | | |
| | Local Union. | | | | | | | | |
| 12. | ADDITIONAL PROVISIONS: | | | | | | | | |
| | | | | | | | | | |
| IN WIT | TNESS WHEREOF, the parties herein has | ve hereunto set their names and | seal on the day and year first above written | | | | | | |
| | , _F | | | | | | | | |
| | PURCHASER'S full and curr | ent name | Name of Signatory Musician | 148-462 Local Union Number | | | | | |
| X | | | X | | | | | | |
| | Signature of Purchaser (or Agent Thereof) | | Signature of Signatory Musician | | | | | | |
| | | | | | | | | | |
| | Street Address | | Musician's Home Address | | | | | | |
| | City | State Zip Code | City | State Zip Code | | | | | |
| | · | • | · | | | | | | |
| | Telephone Number | | Telephone Number | | | | | | |
| NAM | ES OF ALL MUSICIANS | LOCAL UNION NO. US | S SOC SEC NO. DIRECT PA | AY SCALE WAGES PENSIO | | | | | |
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| | | (continued | d on reverse side) | | | | | | |

| NAMES OF ALL MUSICIANS | LOCAL UNION NO | . US SOC SEC NO. | DIRECT PAY | SCALE WAGES | PENSION | | | |
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| | | I musician foos | | | | | | |
| | rota | l musician fees Total | Scale Wages | | | | | |
| | | Total Pension contribution | | | | | | |
| Signatory Employer Name Payor Employer (if different) | | | | | | | | |

IMPORTANT: make pension checks payable to "AFM-EPF", and forward to: