

**EXHIBIT A-1  
STANDARD SAG-AFTRA EMPLOYMENT CONTRACT FOR  
AUDIO/VISUAL COMMERCIALS - Principal Performers**

Date: \_\_\_\_\_  
Est. #: \_\_\_\_\_  
Job #: \_\_\_\_\_

Between (Producer) \_\_\_\_\_, and (Performer) \_\_\_\_\_.

**Producer engages Performer and Performer agrees to perform services for Producer in Commercials as follows:**

For Agency: \_\_\_\_\_ Engagement Date: \_\_\_\_\_  
Agency Address: \_\_\_\_\_ Place: \_\_\_\_\_ Zip: \_\_\_\_\_  
acting as agent for Advertiser: \_\_\_\_\_ Product: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Compensation: \_\_\_\_\_ Part Played: \_\_\_\_\_ Time From: \_\_\_\_\_ To: \_\_\_\_\_

Employer of Record for income tax and unemployment insurance purposes: Talent Entertainment And Media Services, Inc. dba TEAM 901 W. Alameda Ave., Suite 100, Burbank, CA 91506

Ad-ID(s)	Title(s)	Tags	Totals
			Spots: _____
			Tags: _____
			Demos: _____

**Classification**

<input type="checkbox"/> On-Camera	<input type="checkbox"/> Principal Performer	<input type="checkbox"/> Puppeteer	<input type="checkbox"/> Signature - Solo or Duo
<input type="checkbox"/> Off-Camera	<input type="checkbox"/> Character Voice	<input type="checkbox"/> Solo or Duo	<input type="checkbox"/> Group Signature 3-5
	<input type="checkbox"/> Stunt Performer	<input type="checkbox"/> Group 3-5	<input type="checkbox"/> Group Signature 6-8
	<input type="checkbox"/> Specialty Act	<input type="checkbox"/> Group 6-8	<input type="checkbox"/> Group Signature 9 or more
	<input type="checkbox"/> Dancer	<input type="checkbox"/> Group 9 or more	<input type="checkbox"/> Pilot
	<input type="checkbox"/> Singer	<input type="checkbox"/> Contractor	<input type="checkbox"/> Other: _____

**Check If Applicable**

Dealer Commercial(s)  
 Type A     Type B

Seasonal Commercial(s)

Test or Test Market Commercial(s)

Non-Air Commercial(s)

Produced for Cable

Internet Only Commercial(s)

New Media Only Commercial(s)

Work in Smoke Required

Foreign Language Translation Services

Other: \_\_\_\_\_

**Wardrobe to be furnished by:**  
 Producer     Performer

If furnished by Performer, # of costumes:  
 Non-Evening @ \$19.21 x \_\_\_\_\_ (#)  
 Evening Wear @ 31.99 x \_\_\_\_\_ (#)

**Total wardrobe fee:** \$ \_\_\_\_\_

**Multiple Tracking or Sweetening:**  
 DID occur     Did NOT occur

Check if Payable:  
 **Flight Insurance** @ \$12.63  
 **Dancer's Footwear Allowance**  
 @ \$12.65 x \_\_\_\_\_ (days)    **Total footwear:** \$ \_\_\_\_\_

The STANDARD PROVISIONS printed on the reverse side/page 2 hereof are a part of this contract. If this contract provides for compensation at SAG-AFTRA minimum, no addition, changes or alterations may be made in this form other than those which are more favorable to the Performer than herein provided. If this contract provides for compensation above SAG-AFTRA minimum, additions may be agreed to between Producer and Performer which do not conflict with the provisions of the SAG-AFTRA Commercials Contract, provided that such additional provisions are separately set forth under "Special Provisions" hereof and signed by the Performer.

Performer DOES NOT CONSENT to the use of his/her services in commercials made hereunder:

on the **Internet**     in **New Media**

as **dealer** commercials payable at dealer commercial rates

**SPECIAL PROVISIONS** (including adjustments, if any, for Stunt Performers):

*Performer acknowledges that he or she has read all the terms and conditions in the Special Provisions herein and hereby agrees thereto.*

\_\_\_\_\_  
(Signature of Performer)

Until Performer shall otherwise direct in writing, Performer authorizes Producer to make all payments to which Performer may be entitled hereunder as follows:

To Performer at W-4 address on page 2.

To Performer c/o: (name) \_\_\_\_\_  
 (address) \_\_\_\_\_

*All notices to Performer shall be sent to the address designated at left for payments and, if Performer desires, to one other address as follows:*

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

All notices to Producer shall be addressed as follows:

PRODUCER (Name of Company): \_\_\_\_\_

Producer Address: \_\_\_\_\_

Producer Email: \_\_\_\_\_

Producer (Print Name): \_\_\_\_\_

SIGNED BY PRODUCER: \_\_\_\_\_

*The Performer has the right to consult with his/her representative or SAG-AFTRA before signing this contract.*

Performer (Print Name): \_\_\_\_\_

SIGNED BY PERFORMER: \_\_\_\_\_

**MINORS ONLY**  
 Performer hereby certifies that he/she is 21 years of age or over (if under 21 years of age this contract must be signed here by a parent or guardian).

I, the undersigned, hereby state that I am the parent/guardian of the above named Performer and do hereby consent and give my permission to this agreement.

Signature of Parent/Guardian: \_\_\_\_\_  Mother  Father  Guardian

DATE	WORKTIME		MEALS		MAKEUP/FITTING		TRAVEL TO LOC		TRAVEL FROM LOC		PERFORMER'S INITIALS
	FROM	TO	FROM	TO	FROM	TO	FROM	TO	FROM	TO	

### STANDARD PROVISIONS

**1. RIGHT TO CONTRACT**

Performer states that to the best of his/her knowledge, he/she has not authorized the use of his/her name, likeness or identifiable voice in any commercial advertising any competitive product or service during the term of permissible use of commercial(s) hereunder and that he/she is free to enter into this Contract and to grant the rights and uses herein set forth.

**2. EXCLUSIVITY**

Performer states that since accepting employment in the commercial(s) covered by this Contract, he/she has not accepted employment in nor authorized the use of his/her name or likeness or identifiable voice in any commercial(s) advertising any competitive product or service and that he/she will not hereafter, during the term of permissible use of the commercial(s) for which he/she is employed hereunder, accept employment in or authorize the use of his/her name or likeness or identifiable voice in any commercial(s) advertising any competitive product or service. This paragraph shall not apply to off-camera solo or duo singers or group performers other than name groups or to performers employed in Seasonal Commercials under Section 41 of the SAG-AFTRA Commercials Contract.

**3. OTHER USES (Strike "a" or "b" or both if such rights not granted by Performer)**

**(a) Foreign Use:** Producer shall have the right to the foreign use of the commercial(s) produced hereunder, for which Producer agrees to pay Performer not less than the additional compensation provided for in the SAG-AFTRA Commercials Contract. Producer agrees to notify SAG-AFTRA union in writing promptly of any such foreign use.

**(b) Theatrical & Industrial Use:** Producer shall have the right to the commercial(s) produced hereunder for theatrical and industrial use as defined and for the period permitted in the SAG-AFTRA Commercials Contract, for which Producer shall pay performer not less than the additional compensation therein provided.

**4. ARBITRATION**

All disputes and controversies of every kind and nature arising out of or in connection with this contract shall be subject to arbitration as provided in Section 58 of the SAG-AFTRA Commercials Contract.

**5. PRODUCER'S RIGHTS**

Performer acknowledges that performer has no right, title or interest of any kind or nature whatsoever in or to the commercial(s). A role owned or created by Producer belongs to Producer and not to the Performer.

**6. CONFIDENTIALITY CLAUSE**

"Confidential Information" means trade secrets, confidential data, and other non-public confidential proprietary information (whether or not labeled as confidential) including any and all financial terms of and products involved in the production and any and all scripts whether communicated orally, in written form, or electronically. Confidential information does not include information that was lawfully in Performer's possession prior to being disclosed in connection with the employment of Performer, is now, or hereafter becomes generally known to the public, or that Performer rightfully obtained without restriction from a third party. Performer acknowledges that Performer has and will become aware of certain Confidential Information. Unless otherwise required by law, Performer agrees that, without Producer's prior written approval, Performer shall hold such Confidential Information in the strictest confidence and that Performer will not disclose such Confidential Information to anyone (other than Performer's representatives in the course of their duties to Performer, which representatives shall be bound by the same restrictions as set forth in this Agreement) or utilize such Confidential Information for Performer's benefit or for the benefit of a third party. Notwithstanding the foregoing, nothing herein shall prohibit Performer from disclosing Confidential Information concerning Performer's wages, hours and other terms and conditions of employment as that term is defined under Section 7 of the National Labor Relations Act. For clarity, except as set forth above, Producer may not demand or request that Performer execute any non-disclosure agreement that has not been approved in advance and in writing by the Union.

<b>LOAN-OUT CORPORATION</b>	<input type="checkbox"/> Performer is working through a loan-out Corporation.	<b>▶ Submit W-9 if incorporated.</b>
Corporation name: _____	FED-ID #: _____	

Performer's Tel: _____	Performer's Email: _____
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Form <b>W-4</b> Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="margin: 0;"><b>▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</b></p>	OMB No. 1545-0074
1 Your first name and middle initial _____ Last name _____		2 Your social security number _____
Home address (number and street or rural route) _____		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <b>Note.</b> If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code _____		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. <input type="checkbox"/>
5 Total number of allowances you are claiming from the applicable W-4 worksheet.		5 _____
6 Additional amount, if any, you want withheld from each paycheck		6 \$ _____
7 I claim exemption from withholding for _____, and I certify that I meet <b>both</b> of the following conditions for exemption. <ul style="list-style-type: none"> <li>• Last year I had a right to a refund of <b>all</b> federal income tax withheld because I had <b>no</b> tax liability, <b>and</b></li> <li>• This year I expect a refund of <b>all</b> federal income tax withheld because I expect to have <b>no</b> tax liability.</li> </ul> If you meet both conditions, write "Exempt" here . . . . . ▶		
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.) <b>TALENT ENTERTAINMENT AND MEDIA SERVICES, INC.</b> <b>dba TEAM</b>		9 Office code (optional) _____ 10 Employer identification number (EIN) _____