

**DEAL MEMORANDUM**

**International Cinematographers Guild  
Local 669**

217-3823 Henning Drive, Burnaby, BC, V5C 6P3  
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**ICG** | INTERNATIONAL  
CINEMATOGRAPHERS  
GUILD · LOCAL 669

Date: \_\_\_\_\_

Expected Start Date: \_\_\_\_\_

**PRODUCTION COMPANY INFORMATION** (to be completed by the production company)

Production Name \_\_\_\_\_  
Production Co. Name \_\_\_\_\_  
Address \_\_\_\_\_ Tel. Number \_\_\_\_\_

**EMPLOYEE INFORMATION** (to be completed by the employee/dependent contractor)

Name \_\_\_\_\_ Please check one:  Employee  
Address \_\_\_\_\_  Dependent Contractor  
Company Name \_\_\_\_\_  
Phone \_\_\_\_\_ Incorporation # \_\_\_\_\_  
SIN \_\_\_\_\_ GST # **R** \_\_\_\_\_

**IN THE EVENT OF AN EMERGENCY, PLEASE NOTIFY:**

Name \_\_\_\_\_ Relation \_\_\_\_\_ Telephone Number \_\_\_\_\_

**DURATION OF EMPLOYMENT** (to be completed by the employer & employee/dependent contractor)

**Daily Employee** OR **Weekly Employee**  
(Guarantee of 60 weekly working hours (70 pay hours) must be paid)  
Initial the appropriate box:  Employer / Employee  Employer / Employee

**EMPLOYMENT PROVISIONS** (to be completed by the employee/dependent contractor)

Position \_\_\_\_\_ Guaranteed Hours (if any) \_\_\_\_\_  
Rate of Pay \$ \_\_\_\_\_ per Hour / Day / Week Box Rental \_\_\_\_\_ per Day / Week  
Please indicate dollar amount

**Guaranteed Hours / Days / Special Provisions**

Pre-Production \_\_\_\_\_  
Production \_\_\_\_\_  
Transportation \_\_\_\_\_  
Screen Credit As per contract / or \_\_\_\_\_  
Miscellaneous \_\_\_\_\_

Nothing contained in this deal memorandum shall provide for lesser rates, terms and conditions, nor otherwise violate the Collective Agreement entered into by ICG 669 and the Company. This contract is null and void, at the option of the employee or dependent contractor, if a collective agreement is not entered into between ICG 669 and the Production Company prior to the expected start date for the employee or dependent contractor.

**Agreed:**

\_\_\_\_\_  
Employee/Dependent Contractor Signature

\_\_\_\_\_  
Employer Representative Signature