

**DEAL MEMORANDUM**

**International Cinematographers Guild  
Local 669**

217-3823 Henning Drive, Burnaby, BC, V5C 6P3  
Phone: 778-330-1669 Fax: 778-330-1670  
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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/independent contractor)

Name \_\_\_\_\_

**Please check one:**  Employee

Address \_\_\_\_\_

Independent 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/independent 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/independent contractor)

Position \_\_\_\_\_ Guaranteed Hours (if any) \_\_\_\_\_

Rate of Pay \$ \_\_\_\_\_ per Hour / Day / Week Box Rental \_\_\_\_\_ per Day / Week  
Please indicate dollar amount (select one) (select one)

**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 independent 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 independent contractor.**

**Agreed:**

\_\_\_\_\_  
Employee/Independent Contractor Signature

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