2017 LETTER OF ADHERENCE

WGA INFORMATIONAL PROGRAM CONTRACT SINGLE PROJECT ONLY

Company:			Phone:		
Street Address:					
City:	State:	Zip Code:	Fax:		
TYPE OF BUSINESS ORC	ofit	enture P artnership	eck all that apply D □Sole Owner □10%	or More Owner □DBA/Sole on:	Proprietor
BUSINESS PRINCIPALS, Name/Title: Name/Title: Name/Title:			Name/Title:		
PROJECT TITLE:					
FORMAT & DESCRIPTIO	N: Please list a	ll applicable formats a	and briefly describe the p	roject/writing	
WRITER(S) EMPLOYED	ON THIS PROJE	CT: Please attach a s	eparate sheet for addition	nal writers	
Name:			Name:		
SSN:			SSN:		
Writing Start Date:	End D	ate:	Writing Start Date: End Date:		
Compensation: \$			Compensation: \$		
Please attach indiv	idual employment	contracts and/or deal m	emos for the writer(s) emplo	yed under this letter of adhere	ence.
Guild of America West, Inc. on writer(s) and writer(s) employe agrees to be bound by the terr Plan" and "Health Fund") of t upon request. The Company als on behalf of the writer(s) en compensation to the Pension Pl to the Writers' Guild-Industry Ppayable to the Producer-Writer Fund. The contribution rates for	behalf of itself and ad in additional capams and conditions of the 2017 Writers Guston agrees to be bound an apployed on the ablan payable to the Felealth Fund. The cost Guild of America for period three (5/2 and 11.5% of gross	its affiliate the Writers Gui acities who are engaged by of Article 6 ("Guild Shop"); ild of America Theatrical and by the terms and condition ove-named project. The cor- producer-Writers Guild of Am- ntribution rates for period to Pension Plan and 11% of gros 2/19 through 5/1/20) are 8, compensation to the Healt	Id of America, East, Inc. (collecthe Company to perform writing Articles 10, 11, and 12 ("Grieved Television Basic Agreement, ons of the Pension Plan and Head onerica Pension Plan and 10.5% owo (5/2/18 through 5/1/19) ares compensation to the Health F.5% of gross compensation to the Fund payable to the Writers'	project only ("Company") recognize trively "WGA") as the exclusive reparts on the above-named project ance and Arbitration"); and Article by reference incorporated herein lith Fund Trust Agreements to make ne (5/2/17 through 5/1/18) are figross compensation to the Health ea.5% of gross compensation to the und payable to the Writers' Guild-Industry Health Fund. Pleasy wagaplans.org.	oresentative of ject. Company e 17 ("Pension and available e contributions 8.5% of gross a Fund payable e Pension Plan ndustry Health oducer-Writers
Accepted and Agreed B	sy:				
COMPANY:		WRITERS GUILD OF A on behalf of itself a WRITERS GUILD OF A	nd its affiliate,	For Producer-Writers Gui America Pension Plan & W Guild Industry Health Fun	Vriters
Signature	Date	Signature	Date	Signature	Date
Print Name		Print Name		Print Name	
Title		Title		Title	



GUARANTEE AGREEMENT

GUARANTEE AGREEMENT

Reference i	s made to the 2017 Letter of Adherence/WGA Interactive Program Contract for the project entitled ("2017 Letter of Adherence") between
(jointly "WG	Guild of America, West, Inc. on behalf of itself and Writers Guild of America, East, Inc. A"), which is entered into concurrently with this guarantee. To induce the WGA to sign the of Adherence, the undersigned, as an individual, agrees to the following:
You agree t	o guarantee performance of the 2017 Letter of Adherence by Company.
and option	o assume all obligations of Company under each employment agreement for writing services or purchase agreement for literary material entered into at any time during the term of the of Adherence.
option or pu or arbitratio Basic Agree between a v	to assume all obligations of the 2017 Letter of Adherence pertaining to such employment and archase agreement and specifically agree to be bound by, and a party to, any grievance and/n under Articles 10,11 and 12 of the 2017 Writers Guild of America Theatrical and Television ement ("2017 MBA"), as incorporated by reference into the 2017 LOA, should a dispute writer and/or WGA and Company arise. You and Company shall be deemed jointly and ble under any grievance, arbitration award or settlement.
_	hat service upon Company pursuant to the 2017 Letter of Adherence and the 2017 MBA shall ervice upon you.
Company fr	tee is irrevocable. Nothing contained in this agreement shall be construed to relieve om its obligations under such employment and option or purchase agreement or its under the 2017 Letter of Adherence or the 2017 MBA.
	y, facsimile, electronic or other copy of this agreement shall have the same effect for all s a signed original.
AGREED	TO AND ACCEPTED
By: Name:	INDIVIDUAL'S SIGNATURE PLEASE PRINT OR TYPE INDIVIDUALS'S NAME
Address:	NO P.O. BOXES OR EQUIVALENT

Date:



NOTICE OF AGENT FOR SERVICE OF PROCESS

The undersigned company hereby appoints the following individual as the Agent for Service of Process in connection with any matters related to the Writers Guild of America collective bargaining agreement.

Should this individual cease to act as agent for service of process for any reason whatsoever, company agrees to appoint a new agent without delay and immediately submit to the WGA, a new Notice of Agent for Service of Process. Company agrees that all written notices required under the provision of said collective bargaining agreement which are sent by first class mail, postage prepaid, to Company's last address, with a copy sent to the below-appointed agent, shall constitute and be valid service under the applicable bargaining agreement. Company understands that the designated agent will remain in effect until the WGA receives notification from Company that the agent has been replaced by another individual.

Agent must be resident of CA or NY. Post Office Boxes or the equivalent are not acceptable.

This agreement may be executed in multiple counterpart and all of which taken together shall constitute one and the same instrument respectively. A photocopy, facsimile, electronic or other copy shall have the same effect for all purposes as a signed original.

PLEASE COMPLETE SECTIONS 1, 2 AND 3 BELOW. (This form will not be accepted unless all 3 sections are completed.)

1.	NAME OF COMPANY:		
	By:	NATURE	
	Name:	ASE PRINT CLEARLY OR TYPE	
	Title:	ASE PRINT CLEARLY OR TYPE	
	undersigned hereby agreeing under any collective ba	to accept service of process in connection with any disputes or not paining agreement:	ices
2.	NAME OF APPOINTED	GENT:	
	Company/Law Firm (if ap	icable):	
		ddress: NO P.O. BOXES OR EQUIVALENT	
		Phone:	
		Email:	
3.	APPOINTED AGENT SI	NS HERE:	
	By: signature		
	Date:		
2017	WGAW Signatory Application		