The Videogame Writers Caucus Membership Eligibility Requirements are set forth below:

1. Completed Application
Please read carefully and fill out all sections of the application, including requested signature on this page.

2. Service Fee
Upon final qualification for VWC membership, a payment in the amount of One Hundred Dollars ($100) for the first annual service fee is due. To make a payment by Visa, MasterCard, or Discover, please go to the secure SendPayment page on the Guild website—www.wga.org/memberpayment—and select “New Associate Caucus Membership Service Fee” from the drop-down menu. You may also pay by check, made payable to WGAW. (The fee is waived for WGAW members in good standing.)

3. Minimum Writing Requirements
Applicants must meet at least one (1) of the following criteria to be eligible for the Videogame Writers Caucus:

• Have received a writing credit on at least one produced videogame. (*Credits which are not easily discernable as writing credits will be reviewed along with submitted written materials by the Videogame Writers Caucus Steering Committee.*)

• Have been employed to write a design document, or any other written videogame material, which in the judgment of the Videogame Writers Caucus Steering Committee is equivalent to writing a thirty (30) minute television script.

• Have been hired to write videogame material under a Writers Guild contract.

Applicants must submit a copy of the written materials in connection with the eligibility requirements. Exceptions to the above requirements will be considered on a case-by-case basis.

Members of the Videogame Writers Caucus Steering Committee will review each application. Please note, any submitted material will not be returned. Upon review the Videogame Writers Caucus Steering Committee will recommend to the WGAW Board of Directors those writers eligible for Videogame Writers Caucus membership. Please allow 3-4 weeks to process your application. If you are or were contracted to write material that has not yet been produced, please contact the WGAW Member Organizing Department (323) 782-4511 for further instructions.

Rights and Obligations of Videogame Writers Caucus Members
Videogame Writers Caucus members may receive Guild mailings, communications, and WGAW publications; receive invitations to VWC-related events; serve on certain Guild committees as designated by the Board of Directors; use the Guild’s Script Registration Service at the reduced rate for Guild members; attend Guild screenings at the WGA theater, subject to the annual availability of this program; become members of the Musicians’ Interguild Credit Union or its successor subject to the discretion of that entity’s governing body; and be entitled to participate, if otherwise eligible, in any employment access program administered by the Guild. VWC members shall grant to the Guild exclusive authority to claim for their benefit any royalty, payment or remuneration of any kind attributable to writing services rendered under a collective bargaining agreement to which the Guild is a party.

Videogame Writers Caucus membership does not provide the right to vote in WGAW elections, to run for office or to attend Writers Guild of America West Inc. membership meetings.

Signature ____________________________________________ Date ______________________

Please Print Your Name ____________________________________________________________
The following information is primarily for internal Guild use and will not be released to outside parties in a manner that would identify you:

Please type or print:

Social Security #: ___________________________________________ Use for Correspondence Use for Membership Card

Professional Name: ____________________________________________ (For Guild records and correspondence, including Credits)

Legal Name: __________________________________________________ (For Guild records)

Pseudonym: ___________________________________________________ (For Guild records)

Guild Affiliations (Check if currently a member of:)

☐ Film Writers Association, Mumbai (FWA) ☐ Writers Guild of America East (WGAE)
☐ La Guilde Française des Scénaristes (La Guilde) ☐ Writers Guild of America West (WGAW)
☐ New Zealand Writers Guild (NZWG) ☐ Writers Guild of Canada (WGC)
☐ Script Writers Guild of Israel (R.A.) ☐ Writers Guild of Great Britain (WGGB)
☐ Seccion de Autores y Adaptadores de Cine (STPC-Mexico) ☐ Writers Guild of Ireland (WGI)
☐ Société des auteurs de radio, télévision et cinema (SARTEC) ☐ Writers Guild of South Africa (WGSA)
☐ Verband Deutscher Drehbuchautoren e.V. (VDD)

(Providing your birthdate is optional. However, your birthdate is required in order to access the WGAW members only section of our website.)

Date of Birth: ___________________________________________ Gender: ☐ Male ☐ Female ☐ Non-Binary

Month Day Year

# 1 HOME ADDRESS:

_____________________________________________________________________________________________________________________________________________________________

_____________________________________________________________________________________________________________________________________________________________

Street only (no P.O. Box) Apt. or Unit #

City/State/Zip

Home Phone: ( _____ ) ___________________________ Cell Phone: ( _____ ) ___________________________ ☐ I authorize WGAW to use this cell phone number to communicate important messages to me.

Home Fax: ( _____ ) ___________________________ Email Address (Required): ___________________________
Applicant’s Professional Name: ____________________________________________

Last 4 Digits of Social Security Number: ________________

# 2 AGENCY: Name of Agency: ___________________________________________

Agent’s Name: ________________________________________

Telephone number: (________) ____________________________

Email address: __________________________________________

The WGAW Agency Administrator is Bertha Garcia: (323) 782-4502. Please contact Bertha with any agency questions you may have.

The recorded agency information number is (323) 782-4572.

Do you want your calls to be referred to your agent?  □ Yes  □ No

Please be aware that WGA policy precludes giving out the home or office addresses, telephone/fax numbers or email addresses of our members. Therefore, if you do not have an agent or do not wish calls to be referred to your agent, please indicate below the names and telephone numbers of any Business Manager, Personal Manager or Attorney to which you would like us to refer callers who attempt to contact you.

(If you have no such contact information, the WGA will aid callers who attempt to contact you by offering to forward unopened mail addressed to you in care of the WGA. We will also forward a fax or contact you by telephone or email to inform you of a caller’s attempt to reach you.)

# 3  □ Business Manager  □ Personal Manager  □ Attorney  □ Other (please specify): ____________________________________________________________________

_____________________________________________________________________________________________________________________________________________________________

Name

Street

City/State/Zip

Telephone number: (________) ____________________________

Email address: __________________________________________

# 4  □ Business Manager  □ Personal Manager  □ Attorney  □ Other (please specify): ____________________________________________________________________

_____________________________________________________________________________________________________________________________________________________________

Name

Street

City/State/Zip

Telephone number: (________) ____________________________

Email address: __________________________________________

# 5  □ Business Manager  □ Personal Manager  □ Attorney  □ Other (please specify): ____________________________________________________________________

_____________________________________________________________________________________________________________________________________________________________

Name

Street

City/State/Zip

Telephone number: (________) ____________________________

Email address: __________________________________________

Among the addresses you have provided on pages 2 and 3 please indicate where you would like the following mailings to be sent.

To which address do you wish to have Written By magazine mailed? 1 □ 2 □ 3 □ 4 □ 5 □

To which address do you wish to have all other guild correspondence mailed? 1 □ 2 □ 3 □ 4 □ 5 □
Qualifying Videogame Work

Videogame Title: _________________________________  Year Produced: ______________________________________________

Game Developer and/or Publisher: _______________________________________________________________________________

Website URL (if applicable): ____________________________________________________________________________________

What writing did you do for this videogame? ______________________________________________________________________

_____________________________________________________________________________________________________________

Did you receive a credit?  ❑ Yes  ❑ No  If yes, what was your credit?  __________________________________________________

Who can verify your participation?  ______________________________________________________________________________

Name and Title: _______________________________________________________________________________________________

Phone: ___________________________  Email: ________________________________________________________________
HELP US HELP YOU:
As part of the Inclusion and Equity Department’s initiative to increase hiring opportunities for various groups of writers, the Guild periodically publishes specialized Membership Directories, or is asked to provide lists of groups of writers to networks, studios and producers who have a particular interest in hiring writers in these groups. By indicating “OK to Publish” on any of the attribute groups below (such as Ethnicity or Women Writers), you are agreeing to allow the Guild to publish your name in these groups or lists. Choosing to publish your name in one or more of these directories can be beneficial to you in terms of providing access to potential employers. If you do not indicate “OK to Publish” on any category, this information will remain confidential by default. If you have any questions, please contact the Inclusion and Equity Department at (323) 782-4589.

Please check all that apply.

Ethnicity .................... OK to Publish  ❑ Yes  ❑ No
❑ African American/Black ❑ Dominican ❑ Mexican ❑ South Asian
❑ African Black ❑ Filipino ❑ Middle Eastern ❑ Spanish
❑ Asian/Pacific Islander Unspecified ❑ Indian ❑ Native American/Indigenous ❑ Vietnamese
❑ Brazilian ❑ Indonesian ❑ Native Hawaiian ❑ White or Caucasian
❑ Central American ❑ Japanese ❑ Puerto Rican ❑
❑ Chinese ❑ Korean ❑ Samoan ❑ Other ________________
❑ Cuban ❑ Latino Unspecified ❑ South American

Language ................... OK to Publish  ❑ Yes  ❑ No
❑ American Sign Language (ASL) ❑ German ❑ Lao ❑ Scandinavian
❑ Any African Language ❑ Greek ❑ Mandarin ❑ Spanish
❑ Any Chinese Language ❑ Hebrew ❑ Marathi ❑ Teguli
❑ Arabic ❑ Hindi/Urdu ❑ Polish ❑ Thai
❑ Bengali ❑ Hungarian ❑ Portuguese ❑ Vietnamese
❑ Cantonese ❑ Italian ❑ Punjabi ❑ Other ________________
❑ Farsi/Persian ❑ Japanese ❑ Romanian ❑
❑ French ❑ Korean ❑ Russian ❑

Age Group ................ OK to Publish  ❑ Yes  ❑ No
❑ Writers over 40 ❑ Writers over 50
Although the Guild may release statistical information on hiring based on age, Member ages are confidential. By selecting either of these options (over 40 and/or over 50), and “OK to Publish” = Yes, you are giving permission to be included in Directories or lists based on your self-designation.

Union and Industry Organization Membership .................. OK to Publish  ❑ Yes  ❑ No
❑ Animation; IA Local 839 ❑ DGA ❑ FILM INDEPENDENT ❑ PGA
❑ Camera; IA Local 600 ❑ Editor; IA Local 700 ❑ INDEPENDENT FILMMAKER PROJECT (IFP) ❑ SAG/AFTRA

Gender Group .......... OK to Publish  ❑ Yes  ❑ No
❑ Women Writers ❑ Transgender Writers

Disabled ..................... OK to Publish  ❑ Yes  ❑ No
❑ Yes

Sexual Orientation .... OK to Publish  ❑ Yes  ❑ No
❑ Bisexual ❑ Gay ❑ Lesbian