American Federation of Musicians of the United States and Canada **CONTRACT**

Form LS-1 (Only for local single engagements on and after June 1, 2010) (Not for use in Canada)

This Agreement for a single engagement is entered into by and between Local , AFM ("Union") and

	("Employer").				
Engagement Date	Place of/Descri	ption of Engagem	ent		
Local Signature	Print Name and Title			Date	
Employer Signature	Print Name and Title				
Optional: Employer hereby designate	tes	t	o make all payme	ents covered by this Agreement.	
Compensation: Compensation is se compensation) and shall be due in ac					
Pension: The Employer will contribute pensionable compensation to the Amwill be made by check payable to "The Union along with a copy of this	he American Federa Agreement within t	ation of Musicians hirty (30) days af	and Employers' P ter the engagemen	Pension Fund" and will be sent to nt.	
Recording: No portion of the perforany manner whatsoever, in the absergermitting such recording, reproductions: The agreement (e.g., an American Federal extent that there is any contradictions).	nce of a written agr tion or transmission e parties may set for ation of Musicians I	eement with the An. orth any other term Form L-1 or L-2),	American Federations and conditions but the terms of the	ion of Musicians relating to and of the engagement in a separate	
Musician's Name (Last, First, Middle Initial) For additional musicians use page 3 and/or attach additional pages showing all required information	Social Security Number	Pensionable Compensation	Non- Pensionable Compensation	Pension Contribution (Pensionable Compensation multiplied by pension rate shown above)	
1)					
2)					
3)					
4)					
5)					
6)					
7)					
8)					
0)					
	TOTAL:				

This Agreement will be accepted by the Fund only if it is complete, contains all required signatures, uses a valid

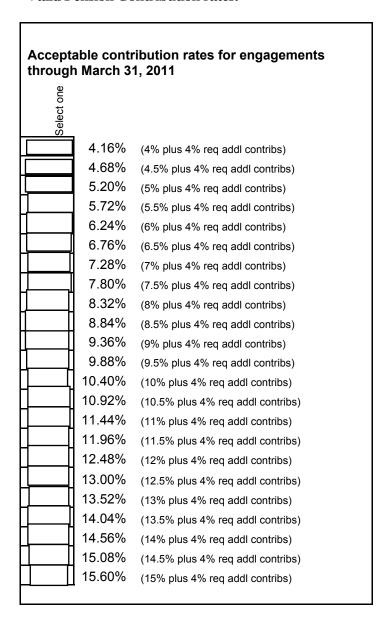
Form LS-1- Rehab Revised 5/2010

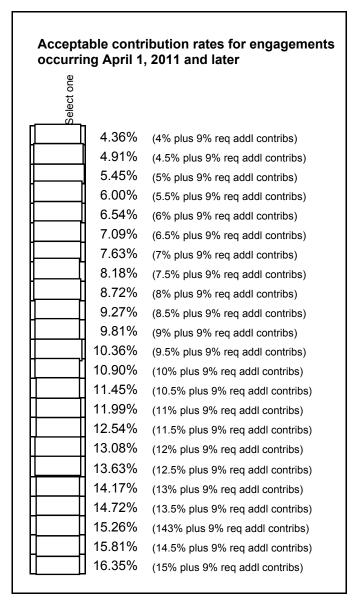
contribution rate and is paid in full.

Additional Provisions of the Agreement Governing Pension Contributions

- The Employer agrees to be bound by the Agreement and Declaration of Trust Establishing the American Federation of Musicians and Employers' Pension Fund (as it may be amended from time to time) which is incorporated by reference into this Agreement.
- The Employer's designation of a third party designee (e.g., a payroll company) to make contributions on its behalf does not relieve the Employer of its obligation to make contributions under this Agreement.
- Contributions under this Agreement on behalf of any owner or part-owner of the Employer (or designates a third party to make such contributions) will be accepted by the Fund only if a valid certificate of incorporation (in the case of a corporation) or LLC Addendum (in the case of a limited liability company and available from the Fund Office) is attached to this Agreement.
- By making contributions on behalf of an individual, the Employer warrants that it has determined that the individual is an employee covered by the Agreement.
- If the Union is not party to the Fund's "Cash Receipts Procedures for Locals that Receive Pension Contributions Directly from Employers," all contributions to the Fund and the remittance form must be sent directly to the Fund at One Penn Plaza, Suite 3115, New York, NY 10119.
- If the contribution rate on the first page of the Agreement is different from one of the acceptable rates shown below, it will be automatically adjusted to the acceptable contribution rate that is next lower and the balance of the contribution will be treated as a nonrefundable administrative fee.

Valid Pension Contribution rates:





AFM REMITTANCE FORM LS-1-R Continuation Sheet

Employer Name
Employer Identification Number or Social Security Number
Engagement Date

Musician's Name (Last, First, Middle Initial)	Social Security #	Pensionable Compensation	Non- Pensionable Compensation	Pension Contribution
9)				
10)				
11)				
12)				
13)				
14)				
15)				
16)				
17)				
18)				
19)				
20)				
	TOTAL:			