

American Federation of Musicians & Employers' Pension Fund P. O. Box 2673 New York, NY 10117-0262 (212) 284-1200 Fax (212) 284-1300

personal service contracts

American Federation of Musicians and Employers' Pension Fund Participation Agreement

		i ai ticipi	ation rigitediment		
Trust Est is incorp Employe specified	tablishing the America orated by reference inters' Pension Fund (the ' percentage (or percen	n Federation of Musicians and En to this Agreement, shall make pen "Fund") on behalf of each employ	nployers' Pension Fund (as it may sion contributions to the America ee covered by this Agreement in a		
*The rate	es shown above are inc	clusive of all amounts required by	the Fund's Rehabilitation Plan ar	nd the 2018 Rehabilitation Plan Update.	
The cont	ribution rate increase r	required by the 2018 Rehabilitatio	n Plan Update (9.09% of the all-in	nclusive rate) will not be considered	
when cal	culating future pension	n benefit payments from the Fund			
1. Who	is Covered by this Ag	greement (Please check only one.)		
	If the Employer is party to a collective bargaining agreement ("Collective Bargaining Agreement") with the American				
	Federation of Musicians ("AFM") or a local union of the AFM, this Agreement covers every employee for whom the				
	Collective Bargaining Agreement requires contributions.				
	If the Employer is not a party to a Collective Bargaining Agreement, this Agreement covers every person who is employed by the Employer and for whom the AFM or the local union of the AFM signing below (the "Local Union") is the collective bargaining representative.				
		behalf of an individual, the employ reement, and the Fund assumes no		d that the individual is an employee	
		Wages." For the purpose of determ, the term "scale wages" shall incl		oyer is required to contribute to	
	All wages for musical services described in the following sections or pages of the Collective Bargaining Agreement or Local Scale Book:				
	OR				
	All compensation for musical services except the following (check all exceptions):				
	V1 1'	D.11	O d'	V	
	Ooubling rincipal pay	Rehearsal pay New use payments	OvertimeLeader Pay	VacationCartage compensation	
	ravel time	New use payments Seniority pay	Contractor pay	Wages earned under	

The term "scale wages" shall not include (i) payments made after or in connection with the Participant's termination of employment except for payments that are specifically identified as pensionable wages under a Collective Bargaining Agreement, or except as required by law; or (ii) royalties, advances or other payments of or reimbursements for expenses or costs incurred by the employee in connection with his or her employment (for example, promotional expenses, recording expenses, cartage expenses or mileage expenses, recording budgets, or similar expense accounts or payments).

_ Music preparation pay

____ Premium Pay

___ Disability pay

____ Sick leave pay

Reuse payments

___ Other (please specify)

	o case later than the end of the calendar month following the month in which			
of Musicians and Employers' Pension Fund." All such chec Local Union is then party to the Fund's "Pension Contribut	ions to the Fund shall be made by check payable to the "American Federation cks shall be transmitted to the Local Union for forwarding to the Fund if the ions Transmittal Agreement." If the Local Union is not then party to the hall be sent directly to AFM-EPF, P. O. Box 2673, New York, NY 10117-			
contributions to the Fund on its behalf if the Fund is furnis or other third party is authorized to act as the Employer's a effect until the Fund receives a written notice of revocation	oyer may authorize a payroll company or other third party to remit hed with a written acknowledgment by the Employer that the payroll company gent in making contributions to the Fund. Such authorization shall remain in a from the Employer. The Employer expressly agrees, however, that the emit contributions on its behalf does not relieve the Employer of any			
6. Business Structure. Please check only one box:				
Corporation or Limited Liability Company (LLC) - If contributions are made on behalf of any owner or part-owner of the Employer, 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 upon request or on the Fund's website at www.afm-epf) must be submitted with this Agreement in order for the Fund to accept these contributions.				
☐ Sole Proprietor, Partnership, LLP or PA - No con Employer.	ntributions will be made on behalf of any owners or part-owners of the			
	effect as long as required under federal labor law if there is a Collective g Agreement, this Agreement shall remain in effect, notwithstanding any other			
☐ From through [date]				
[date] [date]				
☐ For five years from the date of acceptance by the Fu both the Employer and the Union.	and, unless the Fund receives an earlier written notice of revocation signed by			
8. Validity of Agreement. This Agreement is accurate in Employer and the Union.	all respects and has been executed by duly authorized representatives of the			
The Employer (Corporate Name):	The Union:			
(Type or print)	(Type or print)			
Address:	Address:			
Tax ID No.:	Signed by:			
Signed by:	Title:			
Title:				
Date:	Date:			

Please send a completed copy of this agreement to the Fund Office at P.O. Box 2673, New York, NY 10117-0262. For all valid agreements and employers, the Fund will send a letter acknowledging acceptance of this agreement to the addresses shown above. A list of the Fund's agreement content and employer collections/payment history requirements titled "Requirements for Approving Collective Bargaining Agreements/Employers" is available at www.afm-epf.org.