

**DIRECTORS GUILD OF AMERICA, INC. (DGA)  
EXPERIMENTAL PROJECT INFORMATION FORM**

**7920 Sunset Blvd., Los Angeles CA 90046, c/o Signatories/Reports Compliance P: 310-289-5362; F: 310.436.1064**

Please complete the following information and submit to the DGA along with required documents ten (10) days prior to start of principal photography. Please print clearly:

**PROJECT INFORMATION:**

Project Title: \_\_\_\_\_  
 Budget:(U.S.) \$ \_\_\_\_\_ Produced on:  Film  Digital  Other: \_\_\_\_\_  
 Principal Photography Start Date: \_\_\_\_\_ Wrap Date: \_\_\_\_\_ Run Time (in minutes): \_\_\_\_\_  
 Location/s: \_\_\_\_\_ Student:  Yes  No School Name: \_\_\_\_\_

**PRODUCER INFORMATION:**

Individual Producer Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**OR**

Signatory Company\*: \_\_\_\_\_ Fed ID#: \_\_\_\_\_  
 Company Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_

*\*Company **must be recorded with the Secretary of State** as an "Inc." or "LLC".*

**OWNER INFORMATION:**

Name Owner/s of Completed Screenplay: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Name Owner/s of Completed Film: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED TO THE DGA:**

- A signed original of the **DGA EXPERIMENTAL PROJECT AGREEMENT**. The Agreement must be signed by the owner/s of the screenplay and completed film. (Both owners must sign if the screenplay and film are owned separately, or if the screenplay and film are co-owned.) The DGA will return a counter-signed copy to the owner/s, upon acceptance.
- Project **BUDGET** (one sheet).
- An **EXPERIMENTAL PROJECT DEAL MEMORANDUM ("Exhibit A")** for each DGA member working on the project, signed by both the owner/s of the screenplay/film and the DGA member.
- Copy of the **FORM PA** (as recorded with the United States Copyright Office).

**Note:** *The producer must notify the DGA immediately if the budget exceeds \$50,000; if the running time exceeds thirty (30) minutes; or if the project will be released commercially. (Exp. Agmt. B.7a-b.)*

**CREW INFORMATION** (please list all):

Position	Print Full Name:	DGA
Director		<input type="checkbox"/> Yes <input type="checkbox"/> No
UPM		<input type="checkbox"/> Yes <input type="checkbox"/> No
1 <sup>st</sup> Assistant Director		<input type="checkbox"/> Yes <input type="checkbox"/> No
2 <sup>nd</sup> Assistant Director		<input type="checkbox"/> Yes <input type="checkbox"/> No
Associate Director		<input type="checkbox"/> Yes <input type="checkbox"/> No
Stage Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No

**EXHIBIT "A"**  
**Experimental Project Deal Memorandum**

**This confirms our agreement to employ you on the project described as follows:**

Name: \_\_\_\_\_

Tel#: \_\_\_\_\_ SS#: \_\_\_\_\_

Loanout Co.: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Director                | <input type="checkbox"/> First Assistant Director  | <input type="checkbox"/> Associate Director |
| <input type="checkbox"/> Unit Production Manager | <input type="checkbox"/> Second Assistant Director | <input type="checkbox"/> Stage Manager      |

Salary (U.S.): \$\_\_\_\_\_ (Studio)      \$\_\_\_\_\_ (Location)       per Week  
 per Day  
 per Show

Production Fee (U.S.): \$\_\_\_\_\_ (Studio)      \$\_\_\_\_\_ (Location)       per Day  
 per Week

Start Date: \_\_\_\_\_ Guaranteed Period: \_\_\_\_\_

**Project Title:** \_\_\_\_\_

Other Terms: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Studio: \_\_\_\_\_ Location: \_\_\_\_\_ Both: \_\_\_\_\_

**This employment is subject to the provisions of the Directors Guild of America, Inc. Experimental Project Agreement.**

**ACCEPTED AND AGREED:**      Signatory: \_\_\_\_\_

Employee: \_\_\_\_\_      By: \_\_\_\_\_

Date: \_\_\_\_\_      Date: \_\_\_\_\_