

**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:**

- o 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.
- o Project **BUDGET** (one sheet).
- o 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.
- o 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: \_\_\_\_\_

Director                                       First Assistant Director                                       Associate Director  
 Unit Production Manager                                       Second Assistant Director                                       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: \_\_\_\_\_