



**PLEASE SUBMIT AT LEAST 3 WEEKS PRIOR TO THE START OF PRODUCTION**

**Live Action  
Animation**

**PROJECT TITLE:** \_\_\_\_\_

**Project Format:** Pilot      Series      Movie      Multi-Part      Other: \_\_\_\_\_

**Production Genre:** Dramatic/Sitcom      Reality      Talk Show      Documentary      Other: \_\_\_\_\_

**Intended Initial Exhibition:** Internet      Mobile Device      Other: \_\_\_\_\_

**URL (If applicable):** \_\_\_\_\_

**Will this content be available for download?:**      Yes      No

**Please list the Product or Service associated with this project (if applicable):** \_\_\_\_\_

**Shooting Location(s) (City, State, Country):** \_\_\_\_\_

**Travel Date(s):** \_\_\_\_\_

**Rehearsal Date(s):** \_\_\_\_\_

**Principal Photography  
START DATE:** \_\_\_\_\_

**Principal Photography  
END DATE:** \_\_\_\_\_

**Project Length:** \_\_\_\_\_  
(In minutes)

**Number of Episodes:** \_\_\_\_\_  
(If applicable)

**Total  
Budget: \$** \_\_\_\_\_

**Principal  
Budget: \$** \_\_\_\_\_

**Background  
Budget: \$** \_\_\_\_\_

**Are you deferring payment to Performers?**      Yes      No

**Do you plan to use any of the following in your production? (Please check all that apply.)**

Animals      Dancers      Minors      Nudity      Puppets      Singers      Stunts

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**SIGNATORY COMPANY OR INDIVIDUAL NAME:** \_\_\_\_\_

**Signatory Address:** \_\_\_\_\_

**Company Structure:** Fed. ID#: \_\_\_\_\_ State: \_\_\_\_\_ Corp:      LLC:      Partnership:      Other: \_\_\_\_\_  
(If applicable)

**Contact Person:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Project Financed by:** \_\_\_\_\_

**Distribution Agreement with:** \_\_\_\_\_

**Licensing Agreement with:** \_\_\_\_\_

**Intended distribution beyond New Media:** \_\_\_\_\_

**Intended Revenue Sources:** \_\_\_\_\_

**PERFORMER INFORMATION**

**Total number of Principal Performers:** \_\_\_\_\_

**Total number of Background Performers:** \_\_\_\_\_

**Number of SAG-AFTRA Members currently cast:** \_\_\_\_\_

(Please note at least 1 (one) SAG-AFTRA member must be cast in order to proceed with the signatory process. Please list all SAG-AFTRA members on the attached Pre-Production Cast List prior to submission.)

**ADDITIONAL DOCUMENTS**

The following four documents are required with your submission in order to proceed with the signatory process:

- Pre-Production Cast List  
(Attached)
- Line-Item Budget
- Copy of the Script  
(Treatments/Outlines are acceptable for non-scripted projects.)
- Signatory Verification
  - Copy of Personal Photo ID  
(If signing as an Individual)
  - State Issued Business Formation Documents  
(If signing as a Corporation, LLC, etc. Please note EIN is not accepted.)

**SUBMISSION PROCESS**

Please email the completed Preliminary Project Sheet and all documentation noted above to:

[SignNMProjects@sagaftra.org](mailto:SignNMProjects@sagaftra.org).

After your paperwork has been reviewed, a Business Representative will contact you with further information.

**PLEASE ALLOW 24-48 HOURS FOR REVIEW AND ASSIGNMENT.**

## PRE-PRODUCTION CAST LIST

Please list all roles, whether cast or not.  
**PLEASE LIST ALL SAG-AFTRA MEMBERS AT THE TOP OF THE FORM**  
 \*Please note either P (Principal) or B (Background) under Performance Category.

Character Name	Actor's Name and Contact Number	SAG-AFTRA ID or Last Four Digits SSN	Agent Name and Contact Number		Days/Weeks Worked	Base Salary	Total Earnings	Perf. Category* (P or B)
					Days			
					Weeks			
					Days			
					Weeks			
					Days			
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