

American Federation of
Labor



Utah State Federation of
Labor

International Alliance of Theatrical Stage Employees, Local 99
526 West 800 South
Salt Lake City, Utah 84101
(801) 359-0513

July 16, 2020

Welcome to IATSE Local 99!

We hope you are excited to become part of an organization that has been representing workers, like you, for well over a century. IATSE Local 99 will increase your career opportunities and help you to secure your future as a professional in the entertainment industry.

Since 1903, Local 99 has represented entertainment industry workers in Salt Lake City and beyond. Our members originally installed screens, operated projectors in movie houses, and worked on traveling shows on the Vaudeville circuit. As the entertainment industry flourished, our work and expertise evolved and expanded beyond our humble beginnings.

Today, Local 99 members and referrals work in motion pictures, commercials, convention centers, theatres, arenas, shops, and performing art centers throughout Utah and southern Idaho. Local 99 is proud to be a part of an International union that is over 150,000 members strong, with Locals spanning coast-to-coast in the U.S., its Territories, and Canada.

Workers under Local 99 administered agreements receive an extraordinary amount of benefits. The IATSE partners with the IATSE National Benefits Fund (NBF) to provide Medical Insurance plans, Pension plans and Annuity plans. These plans are employer-contributed, self-directed, and may be individually maintained between union jobs.

Workers on our MPTV List obligate themselves to a 2% assessment known as “work dues,” which can be deducted from your paycheck if you so choose. Sign and return page 6 of this packet to complete this process. If you choose not to have it deducted, you will still be responsible for the amount owed to Local 99. These work dues are in addition to quarterly dues, which are \$72 per quarter for the year of 2020 and \$77 per quarter in 2021, should you apply to become a member.

We are currently running a membership drive: anyone who has worked under any Local 99 administered Collective Bargaining Agreement(s) for a cumulative thirty days in the past twelve months is eligible to apply for membership and have their initiation fees waived by the Local (i.e. Area Standard Agreement, AICP Commercial Agreement, Low-Budget Theatrical Agreement). The International will also waive the application fee. Applicants must provide a list of the thirty days worked, and in as many cases as possible, paystubs. A membership application can be requested via email to front.office@ialocal99.org or you can find a blank membership application on page 10.

At Local 99, you are part of a community that fosters a culture of continuous learning. You have access to safety and craft training classes and many physical and virtual resources to assist you in both your personal and professional lives. See pages 7-9 of this packet for more information.

Being a union worker goes far beyond paying dues and wearing union swag: in the labor movement, the sense of community that is created amongst workers is called “solidarity.” Solidarity is important to understand and practice in our daily lives because it means standing with and supporting all other workers, simply because they are workers, like you. IATSE workers are there to support each other, because when we speak up together, we are always more powerful than when we act on our own.

Welcome! Please return pages 3-6 to front.office@ialocal99.org. If you have any questions, please don’t hesitate to call.

In Solidarity,
Local 99 Trustees, Business Agents, and Financial Secretary

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IATSE Local 99 Motion Picture/Television Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO GED?: YES NO

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Military Service

Branch: _____ From: _____ To: _____

MP & TV DEPARTMENT & CRAFTS LIST

Select up to two.

<u>ART</u>	<u>CONSTRUCTION</u>	<u>GREENS</u>	<u>PAINT</u>	<u>SET DECORATING</u>
Art Dept. Coordinator	Coordinator	Foreman	Charge Scenic	Decorator
Set Designer	Foreman	Gang Boss	Scenic Artist	Leadman
Graphic Artist	Buyer	Greensman	Foreman	Draper
	Gang Boss		Gang Boss	Dresser
<u>CRAFT SERVICE</u>	Toolman	<u>SPECIAL EFFECTS</u>	Sign Writer	On-Set Dresser
Key Craft Service	Propmaker	Coordinator	On-Set Painter	Buyer
Asst. Craft Service	Model Maker	Foreman	Set Painter	
	Welder	Effects Technician	Utility	<u>SOUND/VIDEO</u>
<u>ELECTRICAL</u>	Utility			Mixer
Gaffer		<u>GRIP</u>	<u>PLASTER</u>	Boom Operator
Best Boy	<u>PROPS</u>	Key Grip	Foreman	Utility
Lamp Operator	Prop Master	Best Boy	Plasterer	Playback Operator
Generator Operator	Asst. Prop Master	Dolly Grip		24-Frame Playback
Dimmer Operator	Props Person	Grip	<u>WARDROBE</u>	Projectionist
Electrician	Armorer		Costume Designer	Video Playback
Dimmer Board Op	Marine Coordinator		Supervisor	Video Assist
	Picture Car Coordinator		Key Costumer	ENG Sound
<u>PRODUCTION</u>	On-Set Picture Cars/Boats		Key Set Costumer	
Office Coordinator	Boat Handler		Set Costumer	<u>MISC</u>
Asst. Coordinator	<u>RIGGING</u>	<u>HAIR/MAKE-UP</u>	Costumer	Medic*
Payroll Accountant	Key Grip	Head Dept.	Ager/Dryer	Set Teacher*
Accountant	Gaffer	Key	Seamstress/ Tailor	Script Supervisor
1st Asst. Accountant		Assistant	Buyer	
2nd Asst. Accountant				

CERTIFICATIONS LIST

(If you choose one of the crafts above with * , you must have a current certification from the below list.)

Ariel Work Platform	OSHA
CPR/First Aid	Safety Passport
ETCP	SCUBA
Fall Protection	SPRAT
Federal or State Explosive License	Teaching:
Forklift Certification	UT State Education Certificate
Medic: ACLS, AMLS, BLS, CAN,	Welding
EMS, EMT, LPN, NPQ Firefighter, PALS,	
Paramedic, RN	

SPECIAL SKILLS LIST

(You may list up to three of the special skills provided below.)

Alterations	Metal Fabrication
Arena Rigging	Puppet Fabrication
Arial Platforms	Storyboard Artist
CAD	Teleprompter Operator
Genny Operator	Welder
Marksmanship Coach	

References

Please list two professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Email: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Email: _____

Previous Motion Picture/Television Employment

You may also attach a resume to this application.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ May we contact your previous supervisor for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ May we contact your previous supervisor for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ May we contact your previous supervisor for a reference? YES NO

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Authorization for Employer to Deduct Assessments

Effectively immediately, the undersigned assigns Local 99 of the International Alliance of Theatrical Stage Employees the sum of 2% of all wages earned, and authorizes and directs all signatory employer(s) to the list of agreements below to deduct such sum from their wages and to remit the same to said union as a work assessment. This assignment shall be irrevocable for a period of at least one year, and shall be automatically renewed, with the same irrevocability, for successive like periods, unless terminated by the undersigned in writing not more than twenty (20) nor less than ten (10) days prior to expiration of such period.

Print Name _____ Social Security Number _____ - _____ - _____

Address _____

Signature _____ Date _____

Videotape Agreement
Area Standards Agreement (ASA)
Low Budget Theatrical Agreement (LBA)
AICP Commercial Agreement
Independent Commercial Agreement
Music Video Agreement (prob not used very often!)
Pay TV Agreement (episodic HBO, STARZ, Showtime, Cinemax)
HBO Films Agreement (HBO long form)



IATSE ENTERTAINMENT & EXHIBITION INDUSTRIES TRAINING TRUST FUND

PROVIDING TRAINING OPPORTUNITIES FOR THE IATSE WORKFORCE

FREE TRAINING FOR MOTION PICTURE AND TELEVISION WORKERS COVERED BY THE IATSE AREA STANDARDS AGREEMENT

STEP 1: SUBMIT AN APPLICATION

Fill out the form on the next page and email your completed application to safety@iatsetrainingtrust.org.

STEP 2: RECEIVE YOUR REGISTRATION PIN VIA EMAIL

Contract Services Safety Pass will email your registration PIN within 1-2 weeks of submitting your application to the IATSE TTF. Check your inbox and junk mail folder:

From: CSATF <no-reply@email.csatf.org>

Subject: Your Contract Services Portal account is ready

STEP 3: REGISTER YOUR PORTAL ACCOUNT

Use the PIN to register your Safety Pass portal account.

STEP 4: COMPLETE THE ONLINE SAFETY TRAINING COURSES

Click the [LOG INTO COURSES](#) → button on the IATSE TTF website (www.iatsetrainingtrust.org/asa) and start taking the online safety courses through your Safety Pass portal account. The courses do not have to be completed in one sitting. They will pick up where you left off.

COURSE DESCRIPTIONS

"A" – General Safety Training/Injury and Illness Prevention Program (IIPP) | 1 hour

This course explains safety orientation, employee/employer rights and responsibilities, hazard communications, use of personal protection equipment, proper lifting techniques, emergency action procedures, and general production safety procedures.

"A2" – Environmental Safety | 3 hours

This course covers a wide range of subjects, including studio lot and location safety, heat illness, severe weather, disaster/emergency response, environmental awareness, transportation of dangerous goods, electrical safety, and workplace cleanliness.

"HP1" – Harassment Prevention 1 | 1 hour

This course will assist individuals to identify behaviors that create or contribute to unlawful harassment, discrimination, and retaliation. It also offers information on how to respond to incidents of harassment in the workplace.

OR

"HP2" – Harassment Prevention 2 | 2 hours

This course will assist individuals to identify behaviors that create or contribute to unlawful harassment, discrimination, and retaliation. It also offers information on how to assist in preventing and responding to incidents of harassment in the workplace.

HP2 is for department heads, keys, and those with supervisory responsibilities. Do not take both HP courses. You may be billed if you take both HP courses without authorization from the IATSE TTF.



MOTION PICTURE TV ONLINE SAFETY COURSES APPLICATION FOR WORKERS COVERED UNDER THE AREA STANDARDS AGREEMENT



The IATSE Training Trust Fund in partnership with Contract Services Safety Pass provides free, online, safety training for all motion picture and television workers working under the IATSE Area Standards Agreement.

Email your application to safety@iatsetrainingtrust.org to enroll in A, A2, and HP1 (or HP2*) Safety Pass courses. *HP2 is for department heads, keys, and those with supervisory responsibilities. Participants are only authorized to take one HP course. Please note you may be billed if you take both HP courses without authorization from the TTF.

Please allow up to two weeks for processing. We will email you once your application is processed and you can enroll in the online courses. Visit our website for more details: www.iatsetrainingtrust.org/asa

GENERAL INFORMATION			
LAST NAME	FIRST NAME	DATE OF BIRTH	MM/DD/YY
MAILING ADDRESS		CITY	STATE ZIP CODE
EMAIL ADDRESS		PHONE NUMBER	
JOB INFORMATION			
IATSE UNION MEMBER	<input type="radio"/> YES <input type="radio"/> NO	NON-MEMBER WORKING UNDER IATSE ASA AGREEMENT	<input type="radio"/> YES <input type="radio"/> NO
IATSE LOCAL #	PRIMARY JOB CLASSIFICATION		
LINKEDIN LEARNING SUBSCRIPTION		NEWSLETTER SUBSCRIPTION	
<input type="radio"/> CHECK HERE FOR A FREE LINKEDIN LEARNING SUBSCRIPTION		<input type="radio"/> CHECK HERE TO SUBSCRIBE TO THE TTF NEWSLETTER	
CERTIFICATION			
<p><i>I certify that all the information on this form is true and complete to the best of my knowledge. If asked, I agree to provide substantiation of the information that I have given on this form. I agree and understand that the IATSE Training Trust Fund will share my name and contact information with my local union and employer to verify my eligibility and enrollment status as well as confirm course completion. I also understand that the IATSE TTF will share my name, email address, and other personally identifiable information on this application with Contract Services Safety Pass, so they can email me about registering for these courses. Contract Services Safety Pass will in turn share information pertaining to my account activation, course registration, and course completions. Any photographs taken at this course with my image may be used in IATSE, IATSE TTF, and CSATTF materials. I also understand that the IATSE TTF will share my name, email address, and other personally identifiable information on this application with the LMS manager, so they can email me my credentials.</i></p>			
APPLICANT SIGNATURE		TODAY'S DATE	

These policies are subject to change at any time by the trustees. The application and/or interpretation of these policies shall at all times be subject to the discretion of the trustees, to the fullest extent permitted by law.

IATSE TTF USE ONLY ELIGIBLE INELIGIBLE DATE ENTERED INITIALS

IATSE TRAINING TRUST FUND **SAFETY FIRST!** **ONLINE COURSES**

Introduction to Basic Entertainment Safety
Biological Hazards
Hazard Communication: Workplace Chemicals
Chemical Protection
Electrical Safety
Fall Prevention and Protection
Elevated Work Platforms and Aerial Lifts
Scaffold Safety
Ergonomics
Noise Exposure
Confined Space/Small Space Awareness
Firearms Safety
Hand and Portable Power Tools
Compressed Gases
Rigging Safety
Welding and Cutting

apply today

www.iatsetrainingtrust.org/safetyfirst





IATSE TTF SAFETY FIRST! ONLINE COURSES APPLICATION

You must be an IATSE TTF Beneficiary to be eligible for this program. A TTF Beneficiary is any individual who is an active IATSE member or is working under an IATSE agreement. You will receive a confirmation email with your credentials once we've confirmed your eligibility for TTF benefits.

Email your application to onlinecourses@iatsetrainingtrust.org.

GENERAL INFORMATION		
LAST NAME	FIRST NAME	DATE OF BIRTH
STREET ADDRESS		CITY
STATE		ZIP CODE
COUNTRY		
MAILING ADDRESS		
EMAIL		PHONE
JOB INFORMATION		
IATSE UNION MEMBER	<input type="checkbox"/> YES <input type="checkbox"/> NO	NON-MEMBER WORKING UNDER IATSE AGREEMENT
		<input type="checkbox"/> YES <input type="checkbox"/> NO
IATSE LOCAL #	PRIMARY JOB CLASSIFICATION Select Primary Job Classification	
LINKEDIN LEARNING SUBSCRIPTION		NEWSLETTER SUBSCRIPTION
<input type="checkbox"/> CHECK HERE FOR A FREE LINKEDIN LEARNING SUBSCRIPTION		<input type="checkbox"/> CHECK HERE TO SUBSCRIBE TO THE IATSE TTF NEWSLETTER
CERTIFICATION		
<p><i>I certify that the information on this form is true and complete to the best of my knowledge. If asked, I agree to provide substantiation of the information I have given on this form. I agree and understand that the IATSE Training Trust Fund will share my name and contact information with my local union and employer to verify my eligibility, enrollment status, and course completion. I also understand that the IATSE TTF will share my name, email address, and other personally identifiable information on this application with the LMS manager, so they can email me my credentials.</i></p>		
APPLICANT SIGNATURE	TODAY'S DATE	

These policies are subject to change at any time by the trustees. The application and/or interpretation of these policies shall at all times be subject to the discretion of the trustees, to the fullest extent permitted by law.

IATSE TTF USE ONLY ELIGIBLE INELIGIBLE CONFIRMED ACCESS DATE

IMPORTANT CONTACT INFORMATION

It is your responsibility to keep your contact information updated. If you get a new cell phone number, email address, or mailing address notify the office via email at front.office@ialocal99.org.

IATSE Local 99

Union Hall Address: 526 W 800 S, Salt Lake City, Utah 84101

Phone Number: (801) 359-0513

For general questions:

Email: front.office@ialocal99.org

Local 99 Trustees

John T. Gorey

C. Faye Harper

Peter Marley

Allison Smartt

Local 99 Stagecraft and Motion Picture

Television

Business Agent: Constance Mallula

Phone: (801) 554-4334

Email: stagecraft@ialocal99.org

Local 99 Tradeshow

Business Agent: Ana Stout

Phone: (801) 471-5752

Email: tradeshow@ialocal99.org

IATSE National Benefits Funds, Health, Annuity, and/or Retirement Plans

Office Address: 417 5th Ave, 3rd Floor, New York, NY 10016

Phone Number(s): Main Number, (212) 580-9092; Toll Free Number, 800-456-FUND (3863)

Fax: (212) 787-3607

Email: psc@iatsenbf.org

Website: <http://www.iatsenbf.org/>

Common MPTV Employer Payroll Contacts

Employer	Contact Name/Department	Phone #	Email	Fax #
Atmosphere Studios	Min Tran, Payroll dept	(801) 703- 5859		
Cast & Crew	Julie Totta	(818) 972-3233	jtotta@castandcrew.com	
Entertainment Partners	Bob Pucher	(818) 955-6166	RPucher@ep.com	



Application for Membership in a Local Union

of the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, Its Territories and Canada

I hereby make application for membership in Local No. _____ of the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, Its Territories and Canada ("the Union"). I base my application for membership on the following facts, which I affirm to be true:

THIS APPLICATION MUST BE ACTED UPON WITHIN SIX MONTHS OTHERWISE A NEW APPLICATION MUST BE SUBMITTED.

THIS APPLICATION MUST BE ACCOMPANIED BY THE \$100.00 PROCESSING FEE OR \$10.00 PROCESSING FEE FOR SPECIAL DEPARTMENT LOCAL UNIONS.

I, _____, was born on _____ and presently
(Print or Type Name) (Month) (Day) (Year)

reside at _____
(Street) (City) (State/Province) (Zip/Postal Code)

Home Phone _____ Cell Phone _____

Email Address _____ Do you have a Twitter account? Yes No

My Social Security/Insurance Number is _____

I am by occupation a _____ and have worked at the following employers in the entertainment industry: _____

Presently employed by _____ as a _____
(Specify Occupation)

Previously applied for membership in a Local Union or Department of the I.A.T.S.E.? _____, to Local No. _____

Was Application rejected? _____. This application is for Journeyman _____ or Apprentice _____? (check one)

PLEDGE

I, the undersigned, as a condition of my membership in the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, Its Territories and Canada, do solemnly pledge myself to accept and abide by the provisions of the I.A.T.S.E. Constitution and Bylaws, as now in force and hereafter legally amended, hereby express my consent to be governed thereby in the conduct of my trade and in my relationship with the Union.

Signature of Applicant _____ Date _____, 20 _____

Initiation Fee _____ Amount Paid _____

(LOCAL SEAL HERE)

This application submitted by Local No. _____

Secretary _____

This is to certify that _____ has on this _____ day of _____, 20 _____, been admitted to membership in Local No. _____ having fully complied with the requirements as set forth in the Constitution and Bylaws of the Local Union and the International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, Its Territories and Canada.

Member's last 4 digits of SSN/SIN _____

(LOCAL SEAL HERE)

_____, President

_____, Secretary

THIS STUB TO BE COMPLETED AND RETURNED TO THE GENERAL OFFICE IMMEDIATELY FOLLOWING APPLICANT'S ADMISSION TO MEMBERSHIP.