

LOCAL 802, AFM CONTRACT

FORM LS-1(h)

This agreement for the engagement(s) des	cribed below is entered into by and between Local 802,			
AFM ("Union") and	("Employer').			
Engagement Date(s)	Engagement Place			
•	on the remittance form on the reverse side of this Agreement and set forth by the Local 802 Musicians Health Fund ("Fund"), but no of the Fund's contribution period.			
Health Contributions: The Employer, or its	designee,, on the Employer's			
completed remittance form for forwarding	to the Plan. All contributions shall be sent to the Union along with a to the Plan within thirty (30) days following the end of the Plan ade by check payable to the Local 802 Musicians Health Fund.			
any manner or by any means whatsoever,	orded, reproduced or transmitted from the place of performance, in the absence of a specific written agreement with Local 802 or the M) relating to and permitting such recording, reproduction or			
	may set forth any other terms and conditions of the engagement in a inditions of this form LS-1(h) shall govern to the extent that there is in other agreement.			
For the Employer (complete all lines)	For the Union (complete all lines)			
Sign Name	Sign Name			
Print Name	Print Name			
Title Date	Title Date			
Address	Address			
City State Zip	City State Zip			
Telephone No	Telephone No			

Note that this Agreement will be accepted by the Plan only if it is complete and accompanied by all required contributions and attachments.

LOCAL 802 MUSICIANS HEALTH FUND Email:
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This worksheet must accompany the signed LS-1(h) form together with your Health Benefit contribution and work dues payment(s).

<u>IMPORTANT</u>: Documentation is now required to show proof of engagements/services performed. The documentation can be contracts, invoices, Paypal/Venmo receipts, or copies of paychecks. This requirement applies to individuals as well as corporations.

Please include the name(s), social security number(s), date(s) of engagement(s), the total gross wages, the amount of health benefit contribution(s) and work dues.

- Health contribution checks: <u>Local 802 HBP</u> include your card number
- Work dues checks: <u>Local 802</u> include your card number

The employer agrees to be bound by the Agreement and Declaration of Trust dated April 22, 1954 establishing the Local 802 Musicians Health Fund.

Name of Musician(s)	S.S.#	Gross Wages	Health Not to exceed 15% of Gross Wages	Work Dues 3.5% performing 2% teaching