

SAG-AFTRA PODCAST TALENT CONTRACT

"Performer/Podcaster"
Name:
Performer Corp/LLC
SAG-AFTRA ID or last four of SSN#:
Address (For notices and payment):
 Check if address above is for Agent
Phone Number:
Email:
Padaget Enjagda(a) (if applicable)
Podcast Episode(s) (if applicable)
deferment, if applicable):
resentative or SAG-AFTRA before signing this contract. In Performer provided such additional provisions do not
nd Performer provided such additional provisions do not Agreement and are separately set forth and attached here PERFORMER:
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nd Performer provided such additional provisions do not Agreement and are separately set forth and attached here PERFORMER: DATE:
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