



Office of the  
Vice President from Canada

# American Federation of Musicians of the United States and Canada

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## LETTER OF ADHERENCE

This letter will serve to confirm that we the undersigned, agree to adhere to the American Federation of Musicians'

### Industrial Film Agreement (Non-Theatrical – Non-Television)

and are acquainted with the terms and conditions thereof. Upon condition that we shall enjoy the rights and privileges provided to the employer thereunder, we agree that such terms and conditions shall govern production and use of film produced thereunder by or for us, and for such productions, we shall be responsible for the due and faithful performance of each and every of the employer obligations set forth therein.

We acknowledge and agree with the AFM that an AFM Local member covered by a Letter of Adherence or similar agreement between us and the AFM (the "Agreement") does not have the authority to execute any agreements, waivers, releases and/or any other documents (collectively a "Release and Waiver") which actually or purport in any way to adversely amend, abridge, alter or otherwise change such member's rights or obligations (which, for such purpose shall include, without limitation, a waiver or release of fees and/or royalties for recordings and/or other media releases relating to the member or his or her works) pursuant to either the Agreement or the Bylaws of the AFM and/or its Locals. Any such Release and Waiver, if so executed by a member, shall be considered for all such purposes to be invalid and unenforceable by us against such individual member and/or the AFM and its Locals.

Very truly yours,

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Name & Title of Authorized Officer

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City Prov. Postal Code

\_\_\_\_\_  
Telephone Fax

\_\_\_\_\_  
Email Website

\_\_\_\_\_  
Name of Production

### For completion by the Federation

AFM acceptance by:

\_\_\_\_\_  
Signature Date

For additional information about filing of contracts, fees, terms etc. please contact AFM Local #: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Fax

Copy to Local by email on \_\_\_\_/\_\_\_\_/\_\_\_\_