



# Application for Bay Area Project Policy (BAPP)

5636 Tujunga Ave, North Hollywood, CA 91601 | Phone: 323-978-8080

**This application must be received and approved by Actors' Equity Association (Equity) prior to the start of any rehearsals using a member of Equity. Applications for single productions must be received by Equity not later than 30 days prior to the start of rehearsals for participating Equity Members. A non-refundable late filing fee of \$75 shall be charged for applications filed less than 14 days prior to the start of rehearsal.**

**Please fill out the following information as completely as possible.  
Incomplete applications will be rejected by Equity.**

Producing Company/Organization: \_\_\_\_\_  
Producer's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Liability Ins. Carrier and Policy Number: \_\_\_\_\_  
Title of Production (s): \_\_\_\_\_ Cast Size: \_\_\_\_\_  
Author: \_\_\_\_\_ Musical \_\_\_\_\_ Dramatic \_\_\_\_\_  
Has this play ever been produced under an Equity Contract or code? Yes No

Theatre/Venue: \_\_\_\_\_ Seating Capacity: \_\_\_\_\_  
Complete Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Rehearsal Location: \_\_\_\_\_ Telephone: \_\_\_\_\_

Rehearsal Dates: From \_\_\_\_\_ to \_\_\_\_\_ Hours per Week: \_\_\_\_\_ Number of Weeks: \_\_\_\_\_  
Performances: From \_\_\_\_\_ to \_\_\_\_\_ Number of Weeks: \_\_\_\_\_ Total Performances: \_\_\_\_\_

Total Production Budget: \_\_\_\_\_ Number of AEA Members: \_\_\_\_\_  
Total Equity Compensation: \_\_\_\_\_ Percentage of Overall Budget: \_\_\_\_\_  
Individual AEA Actor Payment: \$ \_\_\_\_\_ Per Performance Weekly Stipend (one-time)

Will everyone that interacts with the actors and stage manager be fully vaccinated against COVID-19? Yes No

Will the production adhere to all applicable COVID-19 Safety Protocols as required?

[\(Memorandum of Understanding Between Actors' Equity Association and Employer Regarding COVID-19 Pandemic Reopening Process · Actors' Equity Association \(actorsequity.org\)\)](#)

Yes No

As signatory, I hereby certify that everything contained within this application is true. I have read and understood the terms and conditions of the Bay Area Project Policy and will abide by them.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## PLEASE ATTACH A COPY OF THE FOLLOWING TO THE APPLICATION:

1. Proof of liability/personal injury insurance for all auditions, rehearsals and performances which covers the AEA Members in a volunteer situation; 2. Detailed production budget, including all payments to individuals, organizations, co-producers and/or fiscal partners receiving compensation; 3. Copy of the Author's Agreement (if premiere production) or copy of licensing agreement; 4. Statement of financial backing (individuals, grants and all other funding sources, including co-producers and/or fiscal partners); 5. Schedule of Performances; 6. A statement of required nudity or simulated acts of a sexual nature, if necessary.