

Crew Deal Memo



Loyola Marymount University
School of
Film and Television

Title of Project: _____

Student Filmmaker's Name: _____

For Crew Member

As a crew member, I promise to:

- Honor my commitment to you and to work all agreed upon days
- Arrive on time and ready to work
- Work as directed until "wrap" is called or 12 work hours have elapsed
- Adhere to the LMU SFTV safety guidelines and call/email the safety hotline if I have safety concerns
- Stay updated on Call Sheet instructions and updates

Expectations of your Director:

- Be prepared, organized, and communicate in advance shoot dates, positions, and responsibilities
- Only film scenes that have been approved by the SFTV Head of Production
- Treat you, the other crew members, and public with respect
- Not work more than 12 hours/day (not including a 1/2 hour meal break)
- Reasonable turn around time, but not less than 10 full hours
- Provide you with access to bathrooms and meals (including craft service, lunch, and/or dinner)

Everyone Must:

- Adhere to [LMU SFTV Production](#) and [COVID Safety Procedures](#) and [Set Etiquette and On Set Best Practices](#)
- Adhere to COVID safety Guidelines, Community Updates, Agreements
- Wear proper footwear and clothing. Keep in mind that you are going to be on your feet for a long, long time. Make sure to bring protective equipment like gloves, sunglasses, and a hat.

Everyone must adhere to the [SFTV & University Code of Conduct and Academic Dishonesty Policies](#). Any violations will be reported to the appropriate department.

- [SFTV Student Code of Conduct & Academic Dishonesty Violations](#)
- Failure to adhere to the LMU SFTV Production safety procedures, COVID safety Guidelines, Community Updates, and Agreements will result in disciplinary action, including grade reduction, fines, loss of equipment, facilities, or screening privileges, course failure, suspension, or expulsion from the University.

Crew Member's Name: _____

Position: _____

Email: _____

Phone: _____

Crew Member's Signature: _____

Start Date: _____

Scheduled End Date: _____

Scheduled Total Days: _____

For Filmmaker

Other Conditions _____
