Motion Picture Studio Production Technicians
Local 849 of the I.A.T.S.E.

Referral Application

(All sections of this form must be completed)

Name:		Birth Date: month day year
Address:		Cell Phone:
City:		Phone:
Province:	Postal Code:	E-mail:
Length of Residency in Maritime Provinces (immediately prior to applying):		
List Union & Guild Affiliations in full:		
Do you have a valid Driver's License? YES ☐ NO ☐	Province:	Class:
Do you own or have easy access to a vehicle? YES ☐ NO ☐		

Department(s) Requested (**Choose up to two**):

☐ Animal Wrangler	☐ Greens	☐ Make-Up	☐ Script Supervision	☐ Special Effects
☐ Costumes	☐ Grip	☐ Marine	☐ Set Construction	☐ Transportation
☐ Craft Service	☐ Hair	☐ Props	☐ Set Decoration	
☐ Diving	☐ Lighting	☐ Scenic Paint	☐ Sound	

In addition to these departments you've chosen, would you like to be added to the General Labour listing? YES ☐ NO ☐

List 3 professional references and their contact information:		
Name:	Name:	Name:
Phone:	Phone:	Phone:
E-mail:	E-mail:	E-mail:

The following items must be accompany this registration form:		*office use only*
1	A current copy of your resume	Received? ☐
2	Proof of completion of a recognized WHMIS course	Received? ☐
3	Copies of all other applicable licenses and/or certificates pertaining to the departments you have chosen (These can be found at www.iatse849.com/membership/referral)	Received? ☐
4	A **non-refundable** Administration Fee specified at www.iatse849.com/membership/referral	Received? ☐
6	Proof of a completed Set Etiquette Course * ** If you have completed the course with Local 849, we should have a record of that on file already. If you have taken a course through another organization or do not have proof of having taken a similar course, you have the option to complete a form to request a waiver of the requirement. You can complete the form after submitting your application here: www.iatse849.com/training/set-etiquette-waiver-form*	Received? ☐ *Date Completed*

IN REGISTERING FOR THE REFERRAL LIST, I ACKNOWLEDGE THE FOLLOWING:

1. That I have read and understand the information included above and on the website: www.iatse849.com/membership/referral
2. That while Local 849 will make best efforts to offer a Set Etiquette Workshop in a timely manner, there may be an indeterminate waiting period before the workshop is made available, depending upon availability of instructors and participants.
3. That once registered as a Referral, I will be required to submit a non-refundable Annual Administration Fee listed on the website to remain on the Referral List. This fee is to be submitted within the first month of the calendar year, accompanied by an up-to-date resume. I understand that I will not be sent any reminder that these items are due - it is my responsibility to remember to fulfill this obligation.
4. I understand that by signing this registration form, I am in no way obligated to continue with the Referral Registration, but that once paid, the Administration Fee is non-refundable.

Signature of Applicant *Date*

Please mail or e-mail photos or scans of completed forms and accompanying documents to:
applications@iatse849.com | 617 Windmill Road, 2nd Floor, Dartmouth, Nova Scotia, B3B 1B6 | Phone: 902.425.2739

Revised: May 2023

(office use only) Date Submitted: month day year