## **LETTER OF ADHERENCE**

Ι,	, (name of individual - print), on behalf
	dge receipt of the NFB-ACTRA 2014-2017 Agreement and state
	ecute this Letter of Adherence to the Agreement on , (the "Producer").
•	les that by executing this Letter of Adherence, the Producer of all the terms and conditions contained in the 2014-2017 NFB-
Dated this day of	·
	Per:
(Name of Producer)	
(Signature)	(Print or type name of individual)
Address, phone and email of Producer) :	
Receipt of the above Letter of Adherence	ce is hereby confirmed by ACTRA.
Per:	Date: