



STUDIO KIDS Management

Client # _____

15068 Rosecrans Avenue #198, La Mirada, CA 90638

562-902-9838 Office – 562-902-0498 Fax – Email:studioKids@ca.rr.com / www.studioKidsmanagement.com

TALENT LISTING MANAGEMENT AGREEMENT

I, Parent/Guardian _____, acknowledge this Agreement made
(Full Name of Parent/Guardian)
between Studio Kids Management and _____ on behalf of my “Minor-
(Parent / Guardian)
Client/Artist”, _____, and hereby retain Studio Kids Management to be his/her
(Full Name of “Minor-Client/Artist”)
Talent Manager/Talent Listing Service.

- I, hereby retain Studio Kids Management to act as manager from the date of this Agreement, and I agree to perform as and when requested by you. I agree to devote my full time and effort, under the direction of Studio Kids Management toward the development of my “Minor-Client/Artist”.
- STUDIO KIDS MANAGEMENT IS A “CALL-IN” SERVICE AND PROVIDES “AN ARTIST’S SCHEDULE OF AVAILABILITY FOR AN AUDITION/INTERVIEW OR EMPLOYMENT OPPORTUNITY” TO CASTING COMPANIES ON BEHALF OF PRODUCTION COMPANIES. PER LABOR CODE 1701g, IT IS CLASSIFIED AS A TALENT LISTING SERVICE. THIS IS NOT A TALENT AGENCY CONTRACT. ONLY A TALENT AGENT LICENSED PURSUANT TO SECTION 1700.5 OF THE LABOR CODE MAY ENGAGE IN THE OCCUPATION OF PROCURING, OFFERING, PROMISING OR ATTEMPTING TO PROCURE EMPLOYMENT OR ENGAGEMENTS FOR AN ARTIST. STUDIO KIDS MANAGEMENT IS PROHIBITED BY LAW FROM OFFERING OR ATTEMPTING TO OBTAIN AUDITIONS OR EMPLOYMENT FOR YOU. FOR MORE INFORMATION, CONSULT CHAPTER 4.5 (COMMENCING WITH SECTION 1701) OF PART 6 OF DIVISION 2 OF THE LABOR CODE. A DISPUTE ARISING OUT OF THE PERFORMANCE OF THE CONTRACT BY THE TALENT SERVICE THAT IS NOT RESOLVED TO THE SATISFACTION OF THE ARTIST SHOULD BE REFERRED TO LOCAL CONSUMER AFFAIRS DEPARTMENT OR LOCAL LAW ENFORCEMENT, AS APPROPRIATE.
- I agree to pay Studio Kids Management, as when monies are received by the “Minor-Client/Artist” and/or “Parent/Guardian”, and during and throughout the term this Agreement, to receive a management commission sum equal to twenty percent (20%) of any and all gross monies, which are related to Studio Kids Management. Let it be said that it may be necessary for Studio Kids Management to collect and receive sums in your child’s name. Whereas monies shall be deposited, any and all checks payable to the minor for Studio Kids Management’s service, and retain there from all sums owing to Studio Kids, and discharge any and all checks to the “Minor-Client/Artist”.
- I agree to pay Studio Kids Management within thirty (30) days of receiving payment from the payroll/production company. I will send a copy of the each check stub to process and all checks will be made to Studio Kids Management. There will be a one-time processing fee upon the first job of thirty U.S. dollars (\$30.00).
- I agree that should the said “Minor-Client/Artist”, at the discretion of the production company, become upgraded to a principal talent, it is the said, “Parent/Guardian’s”, responsibility to obtain a Talent Agent to help further any negotiations and/or such future contracts. In the event the client may need Studio Kids Management to assign a licensed SAG franchised talent agency to the job for any and all possible negotiations. If a SAG Agency is required for a job it would be your responsibility to pay their legal standard commission and all said payments to be made direct to the agency. In addition, let it be said that should such situation occur Studio Kids Management will continue to receive a management sum equal to twenty percent (20%) on all gross monies. All commissions are due under this agreement for work up to the time of discontinuance, including all subsequently earned residuals, which may accrue after the discontinuance of this agreement, remain due and payable to Studio Kids Management.
- In the event “Minor-Client/Artist” cancels or does not show up for a job, and we cannot find a replacement, the lost commission will be billed to the “Minor-Client/Artist”.
- I agree to send a mandatory current 4x6 color photo of the “Minor-Client/Artist” in front of a white background yearly. There will be a ten U.S. dollar (\$10.00) update photo reproduction/fee.
- It is my responsibility to obtain an Entertainment Work Permit every six (6) months through the State of California Division of Labor Standard Enforcement office in order for the “Minor-Client/Artist”, and a Xerox copy is needed in the office of Studio Kids Management to consider my “Minor-Client/Artist” active.



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- ❑ It is my responsibility to obtain a Minor Coogan Blocked Trust Account per Labor Code 1308.9 within seven (7) business days after a minor’s employment contract is signed, and to provide the minor’s employer with a copy of a trustee’s statement (evidencing proof of the account) within ten (10) business days after the start of employment.
- ❑ It is understood that Studio Kids Management is working in the entertainment industry covering, but not limited to, movies, television, commercials, and modeling.
- ❑ I accept that since the nature and extent of the success or failure of my “Minor-Client/Artist” career cannot be predetermined the failure or success is not Studio Kids Management’s responsibility. This agreement is a formal binding agreement, can be dissolved at any time by either party, if either party so deems.

SIGNATURE: PARENT/GUARDIAN: _____

“MINOR-CLIENT/ARTIST NAME: _____ **DOB:** _____
(Print “Minor-Client/Artist” Name)

YOUR RIGHT TO CANCEL

Effective date: _____ Last cancel date: _____

You may cancel this agreement and obtain a full refund, without any penalty or obligation, if notice of cancellation is given, in writing, within 10 business days from the above date or the date on which you commence utilizing the services under this agreement, whichever is longer. For purposes of this section, business days are Monday through Friday. To cancel this agreement, mail or deliver or send by facsimile transmission a signed and dated copy of the following cancellation notice or any other written notice of cancellation to Studio Kids Management at 15068 Rosecrans Avenue #198, La Mirada, CA 90638, Fax number 562-902-0498, NOT LATER THAN MIDNIGHT OF the above last cancel date. There will be no refunds after the above last cancel date. After the ten (10) day period this agreement can be cancelled at any time by written notice of one party to the other.

SIGNATURE: PARENT/GUARDIAN _____

“MINOR-CLIENT/ARTIST NAME : _____ **DOB:** _____
(Print “Minor-Client/Artist” Name)

For SKM: _____

CANCELLATION NOTICE

I hereby cancel this Agreement between “**MINOR-CLIENT/ARTIST NAME:** _____ (Print)

Dated _____

Parent/Legal Signature: _____ Print Name: _____

If you cancel, all fees you have paid must be refunded to you within ten (10) business days after delivery of the cancellation notice to Studio Kids Management.

For SKM: _____

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