



IATSE LOCAL 891

International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada • British Columbia and the Yukon

Page 1 - HAIR DEPARTMENT APPLICATION FORM

Please indicate which status you are applying for:

PERMITTEE STATUS

SISTER LOCAL STATUS

Attach Letter of Good Standing

Membership Card (front & back)

Local # _____

Please indicate which positions you are applying to in the Hair Department:

Assistant Hairstylist

Hair Department Head

Second Assistant Hairstylist

***Copies of your resume and required documents (such as certificates, tickets, etc.) must be emailed to applications@iatse.com as attachments along with your completed application. PDF format preferred.**

Please complete the following details

Name: _____
FIRST MIDDLE LAST

Address: _____
STREET CITY PROVINCE/POSTAL CODE

Providing birthdate and gender information is optional. This is asked for demographics only and will not be used to determine eligibility.

Birthdate: _____ day month year Gender: _____

Home Phone: _____ Mobile Phone: _____

E-Mail Address: _____ Website: _____

Emergency contact-Optional: Name _____ Phone: _____

Last 4 digits of Social Insurance #: _____

IATSE LOCAL 891 PERMITTEE AND SISTER LOCAL APPLICATION AGREEMENT – MUST BE SUBMITTED WITH APPLICATION

1. I, _____ acknowledge that I have read and will fully abide by the IATSE Local 891 (the “Local”) Availability and Dispatch Procedures that are located on the Local’s website [here](#). I understand that these procedures are subject to change at the discretion of the Local, and that it is my responsibility to monitor the website to stay apprised of any changes and to abide by them.
2. As a Permittee applicant, or once approved as a Permittee, I agree that I will not accept work within the jurisdiction of the Local without first gaining the Local’s authorization by a valid permit and/or record of Union dispatch. If I am contacted directly by a production, I recognize that it is my responsibility to verify my hiring by contacting the Local’s Dispatch at 604-664-8916. I acknowledge that it is my sole responsibility to ensure that I have been properly dispatched or work permitted by the Union, that repeated infractions of this kind can result in my removal from the Local’s permittee roster, and any unauthorized days worked will not count towards membership requirements.
3. I understand that if permitted or dispatched to accept work I am required to provide the Canadian and Provincial residency information sufficient to ensure that the production company is eligible to receive the federal and provincial incentives including tax credits. This information can be found on the Local’s website at [here](#).
4. I acknowledge and agree that any work I receive as a Permittee applicant or approved Permittee is also subject to the following:
 - Work is as a non-member of the Local and will not create or be counted towards retroactive seniority should I be granted membership in the future;
 - Work is of a very temporary nature, acceptance of such work does not create an entitlement to ongoing or future work, and there is no obligation on the Local to assist or provide future work opportunities as a non-member;
 - There is no guarantee of work; and,
 - The Local has the right to make the final determination of any/all work offered.
5. I acknowledge that my employment will be governed by the terms of the Master Collective Agreement, or other applicable stand-alone Collective Agreement of the Local, and the policies and procedures of the Local. In addition, I understand that I am required to consent to the deduction and remittance of working dues in the amount provided for under the Collective Agreement to the Local.
6. I acknowledge that in completing this application, I am not being offered membership in IATSE Local 891, and that this applicant agreement must be signed before I am entitled to accept any work offered.

BARGAINING AUTHORIZATION: In applying, I understand that the Local intends to apply to be certified as my exclusive bargaining agent and to represent me in collective bargaining.

CONSENT TO THE COLLECTION, USE, DISCLOSURE AND RETENTION OF PERSONAL INFORMATION: I acknowledge that I have had an opportunity to read and agree to the Applicant Personal Information Policy located on the Local’s website [here](#) and I have had an opportunity to read and agree to the Local’s Privacy Policy located on the Local’s website [here](#).

I certify that all information stated and provided with this application is true and complete to the best of my knowledge. I authorize IATSE Local 891 to verify this information provided in this application. I agree that any intentional misrepresentation on this application could result in the termination of my union status.

Dated: _____ **Signature** _____
Signature or typed initials providing your acceptance of this agreement



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Consent to Receive Electronic Communications

This form will confirm that you have consented to receive our electronic communications, including but not limited to our newsletters, production summaries, production reports, notifications with respect to seminars and fundraisers, departmental communications, communications from third parties, and other notifications we send from time to time for the purpose of (i) sharing information; (ii) establishing, developing and/or maintaining our relationship with you; and (iii) in accordance with our strategic objectives.

Please note that the provisions of our Privacy Policy continue to apply.

Please sign and date this consent below to confirm your agreement.

Last 4 digits of S.I.N.

Printed Name

Signature or typed initial providing your consent

Date

Resource ID number
(To be added by staff)

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FILM & TELEVISION EXPERIENCE - list your film and tv experience below.

Please note: Work experience may be verified.

Production Title: _____ Dates: _____

Feature, Television, Video, or Commercial: _____

Position/Duties: _____

Reference Name and Phone Number: _____

Production Title: _____ Dates: _____

Feature, Television, Video, or Commercial: _____

Position/Duties: _____

Reference Name and Phone Number: _____

Production Title: _____ Dates: _____

Feature, Television, Video, or Commercial: _____

Position/Duties: _____

Reference Name and Phone Number: _____

Production Title: _____ Dates: _____

Feature, Television, Video, or Commercial: _____

Position/Duties: _____

Reference Name and Phone Number: _____

Production Title: _____ Dates: _____

Feature, Television, Video, or Commercial: _____

Position/Duties: _____

Reference Name and Phone Number: _____

RELATED EXPERIENCE/SPECIAL SKILLS:

EDUCATION/TRAINING/CERTIFICATES/LICENSES (please include copies):

HAIR DEPARTMENT QUALIFICATIONS



Please check off the appropriate qualifications you possess and attach copies of all corresponding documentation, letters of reference, and/or verification, and include this form with your application.

To apply for work in the Hair Department an applicant **MUST provide proof (certification and work verification letters) of the following:**

☐ HAIRDRESSER/STYLIST

- ☐ A copy of your Red Seal Certificate and/or current BeautyCouncil Certificate of Qualification, issued by the Cosmetologists' Association of B.C.
- ☐ Proof of a minimum of 2 years (500 hours) experience in theatre, film, television, commercials, or a related field in the Hair Department.
[\(Click here for sample of proof work verification letter\)](#)
- ☐ Proof of a minimum of 5 or more licensed years as a practicing hairdresser immediately preceding the date of this application. [\(Click here for sample of proof letter\)](#)

☐ BARBER

- ☐ A copy of your Red Seal Certificate and/or current BeautyCouncil Certificate of Qualification, issued by the Cosmetologists' Association of B.C. (including Barber Course).
- ☐ Proof of a minimum of 2 years experience in theatre, film, television, commercials, or a related field as a barber. [\(Click here for sample of proof work verification letter\)](#)
May only work on set as Barber — unless you hold a Red Seal Certificate and/or current BeautyCouncil Certificate of Qualification, issued by the Cosmetologists' Association of B.C. and meet all the other requirements of the Hair Department.

☐ WIG MAKER

Proof of a minimum of 2 years experience in theatre, film, television, commercials, or a related field as a wig maker. [\(Click here for sample of proof work verification letter\)](#)

May only work on set as a wig maker — unless you hold a Red Seal Certificate and/or current BeautyCouncil Certificate of Qualification, issued by the Cosmetologists' Association of B.C. and meet all the other requirements of the Hair Department.

All applicants must also provide copies of (please check):

Motion Picture Industry Orientation Certificate

WHMIS 2015 Certificate

Attach a resume (in pdf format)

Save your completed application (this document) to submit to applications@iatse.com

IMPORTANT INFORMATION:

Revised March 2019

- Each individual employer enforces strict confidentiality and social media policies. Violations of these policies may have adverse consequences for your employment and union status.
- Most employers require employees to report to work at locations that are inaccessible to public transit, therefore it is strongly recommended that you have a valid BC Drivers License and use of a reliable vehicle. Many positions require employees to travel between work locations. Employees using their own vehicles must be able to provide their employer with proof of having Business Class Insurance. ****Please do not forward copies of your drivers license, as this information is not required for your application.***

Highly recommended Kit tools and equipment for the Hair Department (the employer may require):

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Set bag | <input type="checkbox"/> Hand sanitizer | <input type="checkbox"/> Disinfectant spray for combs & brushes |
| <input type="checkbox"/> Hot rollers | <input type="checkbox"/> Clippers with various guards | <input type="checkbox"/> Rain gear (outerwear & proper boots) |
| <input type="checkbox"/> Blow dryer | <input type="checkbox"/> Extension cord & power bar | <input type="checkbox"/> Elastics (black, brown, beige, & clear) |
| <input type="checkbox"/> Cutting cape | <input type="checkbox"/> Water spray bottle | <input type="checkbox"/> Hair brushes & combs (various, more than 1 of each) |
| <input type="checkbox"/> Neck brush | <input type="checkbox"/> Digital camera | <input type="checkbox"/> Various irons (e.g. curling, flat, etc.) |
| <input type="checkbox"/> Towels | <input type="checkbox"/> Cutting scissors/razor | <input type="checkbox"/> Bobby pins & hair pins (various colours & sizes) |
| <input type="checkbox"/> Butane iron | <input type="checkbox"/> Hair accessories (clips, combs, etc.) | <input type="checkbox"/> Styling products (various - e.g. hairsprays, gels, etc.) |
| <input type="checkbox"/> Barbacide | Your own set chair | Wig stand |

Required equipment for the Hair Department:

All weather gear:

Your work requires you to be on location, you must have all weather gear. All weather gear includes: clothing, footwear and accessories you are going to need to work both outdoor and indoor conditions. Weather conditions can change quickly, please come prepared!

Note: Open-toed shoes are not permitted on any set.