



DIRECTORS GUILD OF GREAT BRITAIN
APPLICATION FORM 2010
For Professional Members

Part 1/3

PROFESSIONAL MEMBERSHIP REQUIREMENT: Minimum of two professional directing credits
– see page 5 for details of suitable credentials.

SUBSCRIPTION FEE: Suggested 1% of your annual earnings from directing, minimum £65,
maximum £900. The membership period is January-December 2010

APPLICATION FORM: This form consists of 3 parts: Application form page 1-6; Payment form page 7 and Data Protection notice page 8. If you have any queries or difficulties when completing this form, do not hesitate to contact the Membership Department 020 7580 9131. Please complete all pages clearly in block capitals, and send to Membership Department, DGGB, 4 Windmill Street, London, W1T 2HZ.

1. PERSONAL DETAILS:

TITLE: _____

FIRST NAME: _____

LAST NAME: _____

PROFESSIONAL NAME:
(If different from above) _____

DATE OF BIRTH: _____

GENDER: MALE FEMALE

PASSPORT NATIONALITY: _____

2. ETHNIC ORIGIN:

We have frequent requests for directors from specific ethnic groups. If you wish to be placed on this list please choose from the following and write below: Black/African, Black/Caribbean, Black/Other, Bangladeshi, Chinese, Indian, Pakistani, Russian, White, Japanese, Other (Specify) Please note: this information will not be printed in the directory.

Ethnic Group: _____

3. CONTACT DETAILS

We can publish up to two addresses plus your agent details. Please indicate on the form if you want us to publish parts of your home and/or office address details only (such as phone number, email address, website etc.)

Any address not available for publication will remain confidential

HOME ADDRESS

Do you want your home address to appear in the Guild Directory?

YES / NO

Do you want your home address to appear on the Guild website?

YES / NO

Do you want your own website to be linked on the Guild website?

YES / NO (only one website can be shown)

NUMBER and STREET: _____

CITY: _____

COUNTY: _____

POSTCODE: _____ TELEPHONE NUMBER: _____

MOBILE: _____ FAX: _____

E-MAIL: _____

WEBSITE: _____

OFFICE ADDRESS:

Do you want your office address to appear in the Guild Directory? YES / NO
Do you want your office address to appear on the Guild website? YES / NO
Do you want your company website to be linked on the Guild website? YES / NO (only one website can be shown)

NAME ORGANISATION: _____

NUMBER and STREET: _____

CITY: _____

COUNTY: _____

POSTCODE: _____ TELEPHONE NUMBER: _____

MOBILE: _____ FAX: _____

E-MAIL: _____

WEBSITE: _____

AGENT:

Do you want your agent details to appear in the Guild Directory? YES / NO
Do you want your agent details to appear on the Guild website? YES / NO

AGENTS NAME: _____

AGENCY: _____

ADDRESS: _____

TELEPHONE NUMBER: _____ FAX: _____

4. YOUR LOCATION - NEAREST TOWN AND CITY (Please circle one only):

Aberdeen / Aberystwyth / Belfast / Birmingham / Bristol / Cambridge / Cardiff / Dublin / Edinburgh / Exeter / Glasgow / Kendal / Leeds / Liverpool / London / Manchester / Newcastle / Norwich / Nottingham / Oxford / Southampton / York

The DGGB hopes to set up regional groups around the country. Would you be interested in helping to co-ordinate gatherings of directors in your area? YES / NO

5. GUILD CONSTITUENCY:

RECORDED MEDIA (Film, TV, Commercials etc.)

LIVE MEDIA (Theatre, Dance, Opera, Mime etc.)

You have the right to receive mailings from both constituencies. Please tick below which area(s) you would like to receive mailing(s) from:

RECORDED MEDIA MAILING LIST

LIVE MEDIA MAILING LIST

6. GUILD ACTIVITIES:

Are you willing to help in the work of the Film and TV Group? YES / NO
 Are you willing to help in the work of the Theatre Group? YES / NO
 Are you willing to help in the work of the Radio Group? YES / NO
 Do you want your name to be put on the Teacher / Training file?
 (if so, please send in a teacher training CV if you haven't already done so) YES / NO

7. MEMBERSHIP OF OTHER ORGANISATIONS (please specify):

AFVPA ASDA BAFTA BECTU DGA DIRECTORS-UK
 EQUITY IVCA NPA PACT WFTV WGGB

8. CATEGORIES OF WORK

It is important that you only tick categories where you actually work, or have worked.
(Please limit your selection to an overall total of TEN areas for this section)

FILM & TV

Animation	<input type="checkbox"/>	Fashion	<input type="checkbox"/>	Religion	<input type="checkbox"/>
Arts	<input type="checkbox"/>	Feature Films	<input type="checkbox"/>	Science	<input type="checkbox"/>
Children's	<input type="checkbox"/>	Live / OB	<input type="checkbox"/>	Schools	<input type="checkbox"/>
Comedy	<input type="checkbox"/>	Magazine	<input type="checkbox"/>	Shorts	<input type="checkbox"/>
Commercials	<input type="checkbox"/>	Multi-camera studio	<input type="checkbox"/>	Sport	<input type="checkbox"/>
Corporate / Non-broadcast	<input type="checkbox"/>	Multi-media	<input type="checkbox"/>	TV Series / Serials	<input type="checkbox"/>
Documentary	<input type="checkbox"/>	Music	<input type="checkbox"/>	TV Singles	<input type="checkbox"/>
Education / Training	<input type="checkbox"/>	Nature / Wildlife	<input type="checkbox"/>	TV Soaps	<input type="checkbox"/>
Entertainment	<input type="checkbox"/>	News / Current Affairs	<input type="checkbox"/>		
Ethnic Minorities	<input type="checkbox"/>	Music Videos	<input type="checkbox"/>		

RADIO

Arts	<input type="checkbox"/>	Education	<input type="checkbox"/>	Science / Industrial	<input type="checkbox"/>
Children	<input type="checkbox"/>	Entertainment	<input type="checkbox"/>	Sport	<input type="checkbox"/>
Commercials	<input type="checkbox"/>	Music	<input type="checkbox"/>	Talks	<input type="checkbox"/>
Documentary	<input type="checkbox"/>	News / Current Affairs	<input type="checkbox"/>	Training	<input type="checkbox"/>
Drama	<input type="checkbox"/>	Schools	<input type="checkbox"/>		

THEATRE, LIVE ART & DANCE

Modern Drama	<input type="checkbox"/>	Contemporary Dance	<input type="checkbox"/>	New Writing	<input type="checkbox"/>
Pre 20 th Century Drama	<input type="checkbox"/>	Devised Work	<input type="checkbox"/>	Opera	<input type="checkbox"/>
Amateur	<input type="checkbox"/>	Fashion	<input type="checkbox"/>	Pantomime	<input type="checkbox"/>
Ballet	<input type="checkbox"/>	Fringe	<input type="checkbox"/>	Puppetry	<input type="checkbox"/>
Cabaret / Variety	<input type="checkbox"/>	Installation / Site specific	<input type="checkbox"/>	Shakespeare	<input type="checkbox"/>
Circus	<input type="checkbox"/>	Mask	<input type="checkbox"/>	Training / Education	<input type="checkbox"/>
Comedy	<input type="checkbox"/>	Multi-media	<input type="checkbox"/>	Theatre for Young People	<input type="checkbox"/>
Community	<input type="checkbox"/>	Music Theatre Choreographer	<input type="checkbox"/>		
Conference Presentations	<input type="checkbox"/>	Music Theatre director	<input type="checkbox"/>		

9. PROJECT IN DEVELOPMENT (one only):

Category of work (from above list only): _____

Working Title: _____

Brief description (10 words maximum): _____

Do you want your project in development to appear in the Guild Directory? YES / NO
Do you want your project in development to appear on the Guild website? YES / NO

10. THE DGGB OBSERVER SCHEME

The Guild Observer Scheme encourages members to learn more about each others' working methods. Would you be willing to take a Guild member as an observer? YES / NO

11. WORKING LANGUAGES IN ADDITION TO ENGLISH (Tick below):

Gaelic Welsh British sign language Dutch/Flemish French German Italian
Polish Portuguese Russian Spanish Cantonese / Mandarin Other _____

12. STATUS (Tick as appropriate):

- i) FREELANCE STAFF
ii) DIRECTOR PRODUCER WRITER CHOREOGRAPHER

Year/s	Medium	Category	Title	Company	Where

Please note that although we can only publish 8 credits we keep others on file. Please list below any other credits you would like us to keep on file for archive purposes (you may use a separate sheet):

Year/s	Medium	Category	Title	Company	Where

14. AWARDS:

Please specify below if your work has received any awards:

Year	Production	Awarding Body	Award

How did you find out about the Directors Guild?

**DIRECTORS GUILD OF GREAT BRITAIN
MEMBERSHIP PAYMENT FORM 2010**

Part 2/3

A PLEASE COMPLETE YOUR PERSONAL CONTACT & PAYMENT DETAILS

PROFESSIONAL NAME: _____
ADDRESS _____
CITY: _____
COUNTY: _____ POSTCODE: _____
COUNTRY: _____ PHONE NUMBER: _____
E-MAIL: _____

Suggested annual payment: 1% of annual earnings from directing: Max. £900, Min. £65

YOUR 2010 MEMBERSHIP FEE*: £ _____

B PLEASE TICK ONE OF THE FOLLOWING METHODS OF PAYMENT

- Cheque(s):** £ _____ made out to *The Directors Guild Trust*
Return with all 8 pages of this form to: **DGGB Membership, 4 Windmill Street, London W1T 2HZ.**
The cheque payment will be processed when your application has been approved. If you would prefer to pay by post-dated cheques, please write your name and the total amount you are paying for 2010 on the back of each post-dated cheque.
- Credit / debit card / BACS / Internet** to Directors Guild Trust; Sort Code: 56-00-14 A/c: 00129518
Return the completed 8-page application form to **DGGB Membership, 4 Windmill Street, London W1T 2HZ.**
When your application has been approved, the Directors Guild will contact you to obtain card details and process payment or ask for your BACS transfer. All major credit cards accepted including AMEX.
- Standing Order**
Return the completed 8-page application form to **DGGB Membership, 4 Windmill Street, London W1T 2HZ.** When your application has been successful, we will send you a Standing Order mandate form by: email post (**please indicate**)

C GIFT AID: PLEASE TICK THIS BOX (IF APPLICABLE)

- I am a UK taxpayer and I wish the Directors Guild Trust (Registered Charity No. 326673) to treat the above amount (less £10 for membership card) and all future donations as GIFT AID. ****

D PLEASE TICK THIS BOX (COMPULSORY FOR PROFESSIONAL MEMBERS)

- I am a professional director listed with the Directors Guild of Great Britain with two or more professional credits and I agree to become a Voting Member and Guarantor of the **THE DIRECTORS GUILD OF GREAT BRITAIN CIC Ltd.** I understand that my guarantor liability is strictly limited to £1 only.

E Signature: _____ **Date:** ____ / ____ / _____

*Your annual membership payment includes £10 for your membership card and the remainder as your donation to the Directors Guild Trust. Your membership card shows that you are a member of the Directors Guild of Great Britain (CIC Ltd).

**We value your membership highly and appreciate if you are on a low income. Gift Aid donations from individuals enable the DGT to claim a further 20p in the pound from the government. If you receive an income on which you pay tax above the Personal or

Married Persons Income Tax Allowance then you are able to tick the Gift Aid option. For the Trust to be able to reclaim tax on an individual's donation, you must have paid income tax and/or capital gains tax in the previous tax year at least equal to 20% of your donation (less £10), which is the tax that the Trust can reclaim. You can cancel your Gift Aid declaration any time by notifying us.

DIRECTORS GUILD OF GREAT BRITAIN **PROFORMA DATA PROTECTION NOTICE** **Part 3/3**

DIRECTORS GUILD PROFORMA DATA PROTECTION NOTICE

FINALLY: Please read this PROFORMA DATA PROTECTION NOTICE and sign the form below.

The Directors Guild Trust and the Directors Guild of Great Britain collect and maintains personal and company information in order to carry out their functions as charity/professional organisation, provide membership services and comply with statutory obligations. All personal information is treated with the utmost confidentiality and with appropriate levels of security. The Guild recognizes its responsibility for protecting the privacy of personal and company information. All such information is protected under the Data Protection Act 1998 and all other applicable legislation.

The personal data will be used for a range of activities relating to the running of the Guild including the maintenance of records. All information (updated as appropriate) will be kept throughout membership and, to the extent necessary, for such reasonable period after membership as may be necessary to enable the Guild to maintain contact unless otherwise requested.

Personal data will be available to only our employees and to the public in the limited form (home and/or office or agent) you have stated on your membership form, for the Directory of Members, website search and for requested contact purposes only. We will never pass on your personal data under any other circumstances nor will we sell this information.

From time to time we will use your information for internal marketing and research purposes. This may benefit you by allowing us to negotiate attractive terms and a wide range of additional member benefits, and to contact you with details of any that we feel may be of particular interest. Please understand that if you do not allow us to process information on your behalf this may preclude you from receiving details of any of these additional member benefits and offers in the future. We may also use aggregated and fully anonymized data; this is of use to the Guild and to external parties for research purposes.

Under the Data Protection Act 1998 you have the right to ask for a copy of your information (for which a small fee may be charged) and to request correction of any incorrect information held. Failure to update incorrect information may result in being used as outlined above, for which the Guild cannot hold any responsibility.

This notice may be amended from time to time and will be published with all membership forms and on the Guild website. Any questions or comments about our administration of data may be sent by email to info@dgggb.org.

I AGREE TO ALLOW THE GUILD TO USE MY PERSONAL DATA AS OUTLINED

Please sign here _____ **Date** _____

Please print your name here: _____

If applicable: on behalf of (establishment) _____

**PLEASE SIGN PAGE 7 AND 8 AND RETURN ALL 8 COMPLETED PAGES
OF THIS APPLICATION FORM TO:**

**Membership Department
DIRECTORS GUILD OF GREAT BRITAIN
4 Windmill Street, London, W1T 2HZ
tel 020 7580 9131 email membership@dgggb.org**

WE CAN ONLY PROCESS YOUR APPLICATION IF YOU FULLY COMPLETE AND RETURN THIS FORM