



Agent & Advisor Registration
Old Dominion University Athletics Compliance

Section 1: GENERAL INFORMATION

A. Full name of registrant: _____

B. Have you ever been known by any other name or surname (e.g., maiden name, etc.)? YES NO

If yes, state all names used and when they were used: _____

C. Name of Your Organization: _____

D. Your Position or Title: _____

E. Organization's Address: _____

City/State/Zip Code: _____

F. Work Phone: _____

G. Fax: _____

H. E-mail: _____

I. I am a certified agent, in good standing as of the date of the completion of this form, with the:
(check all that apply and provide date of approval for each)

Major League Baseball Players Association, date of approval: _____

National Basketball Players Association, date of approval: _____

National Football League Players Association, date of approval: _____

Other: _____, date of approval: _____

Other: _____, date of approval: _____

Section 2: EDUCATION

A. Professional/Graduate School(s):

(School) (City/State) (Degree) (Date Awarded)

(School) (City/State) (Degree) (Date Awarded)

B. Undergraduate School(s):

(School) (City/State) (Degree) (Date Awarded)

(School) (City/State) (Degree) (Date Awarded)

Section 3: PREVIOUS OCCUPATION/EMPLOYMENT

A. Please provide your relevant employment history for the past five years in the spaces provided below if all such information is not included on an enclosed resume:

<u>Employer</u>	<u>Employer Address</u>	<u>Employer Phone</u>	<u>Dates of Employment</u>

Section 4: LAWYERS/LAW GRADUATES

(If you are not a lawyer/law graduate, please proceed to Section 5)

A. Please list the jurisdictions in which you have been admitted to the Bar and the dates of admission:

<u>Jurisdiction</u>	<u>Date of Admission</u>	<u>Status</u>

B. If you have any applications for Bar admission currently pending, please state where you have applied and the status of that application:

C. If you have ever been disbarred, suspended, reprimanded, censured, or otherwise disciplined or disqualified as an attorney, a member of any other profession, or a public office holder, please provide the following information:

<u>Action</u>	<u>Dates of Occurrence</u>	<u>Authority Imposing the Action</u>

D. If any charges or complaints are currently pending against you regarding your conduct as an attorney, a member of any profession, or a public office holder, please provide the following information:

Charge/Complaint Pending

Authority Considering the Charge/Complaint

E. Has your right to practice before any governmental office, bureau, agency, commission, etc. ever been disqualified, suspended, withdrawn, denied, or terminated? YES NO If yes, please explain fully:

Section 5: ALL APPLICANTS - PROFESSIONAL BACKGROUND

(Lawyers/law graduates please answer these questions only as they relate to your profession in any way other than already provided in Section 4)

A. Please list any memberships that you have in business or professional organizations which directly relate to your occupation or profession:

B. Please list any occupational or professional licenses or other similar credentials (i.e., Certified Public Accountant, Chartered Life Underwriter, Registered Investment Advisor, etc.) you have obtained other than college or graduate school degrees, including the dates obtained:

C. If you have ever been denied an occupational or professional license, franchise or other similar credentials for which you applied, please explain fully:

D. Please describe and indicate the status of any applications you currently have pending for an occupational or professional license, franchise or other similar credentials:

E. If you have ever been suspended, reprimanded, censured, or otherwise disciplined or disqualified as a member of any profession, or as a public office holder, please complete the following:

<u>Action</u>	<u>Dates of Occurrence</u>	<u>Authority Imposing the Action</u>

F. Please indicate the nature of any charges or complaints currently pending against you regarding your conduct as a member of any profession, or as a public office holder, and the name and address of the authority considering the charges or complaints:

<u>Charge/Complaint Pending</u>	<u>Authority Considering the Charge/Complaint</u>

G. Has your right to engage in any profession or occupation has ever been disqualified, suspended, withdrawn, or terminated?

YES NO If yes, please explain fully:

H. Please list the state(s) in which you are currently registered or have applied to be registered pursuant to any state statutes regulating athlete agents or advisors.

<u>State</u>	<u>Status of Registration</u>	<u>State</u>	<u>Status of Registration</u>

I. If you have ever been disciplined or cited for a violation of a state statute regulating athlete agents, please complete the following:

<u>Complaint/Charge</u>	<u>Date of Alleged Violation</u>	<u>Result/Status of Investigation</u>	<u>Authority Imposing the Action</u>

Section 6: ALL APPLICANTS - COMPLIANCE BACKGROUND

A. If you have ever been involved in or accused of participating in any action alleged to have been in violation of the rules of the NCAA, any Conference, any university or college, any players association, and/or any sports club, league, federation, or team, please complete the following:

<u>Complaint/Charge</u>	<u>Date of Alleged Violation</u>	<u>Result/Status of Investigation</u>	<u>Authority Imposing the Action</u>

B. If you have ever been convicted of or plead guilty to a criminal charge, other than minor traffic violations, please complete the following:

<u>Offense</u>	<u>Date of Conviction</u>	<u>Criminal Authority Involved</u>	<u>Punishment Assessed</u>

C. If you have ever been a defendant in any civil proceedings, including bankruptcy proceedings, in which allegations of fraud, misrepresentation, embezzlement, misappropriation of funds, conversion, breach of fiduciary duty, forgery, or legal malpractice were made against you, please describe fully and indicate the date and results of the civil proceeding(s) in question:

D. Please provide details if you have ever been adjudicated insane or legally incompetent by any court:

E. If you were ever suspended or expelled from any college, university, law school, or graduate school, please explain fully:

F. If any surety or any bond on which you were covered has been required to pay any money on your behalf, please describe the circumstances fully:

G. If there are any unsatisfied judgments of continuing effect against you (excluding alimony and child support), please explain fully:

H. If you have been declared bankrupt, or been an owner or part owner of a business which was declared bankrupt, please provide full details:

Section 7: BUSINESS SERVICES

A. Please indicate the services that you/your organization offer to athletes (*check all that apply*):

Contract Negotiation	Financial Planning	Appearances/Endorsements
Tax Planning	Estate Planning	Insurance Planning/Coverage
Investment Counseling	Grievance-Arbitration	

Other Services (please explain):

B. Do you offer separate contracts for each service? YES NO

C. If you provide services in addition to contract negotiations services, indicate your customary fees for each service. Specify whether fees are based on a percentage of the player's salary negotiated, on his or her total income, on an hourly fee, or on some other arrangement. Indicate the relationship, if any, of such fees to the fees you charge for player contract negotiations and related services.

D. Do you handle athletes' funds? YES NO

If yes, are you bonded? YES NO

If you are bonded, please provide the following information about the bond:

Amount of Bond

Name of Surety/Bonding Company

E. Are you currently registered under the Investment Advisor's Act? YES NO

F. If you assist players with securing the services that you do not provide, please provide the following information about the individual(s)/firm(s) to which you customarily refer players for each service:

<u>Individual/Firm</u>	<u>Services</u>	<u>Phone Number</u>

G. Do you receive a fee from any individual(s)/firm(s) for referral? YES NO If yes, what is the basis of any fee?

H. Do you (a) have an ownership interest in; (b) wholly or partially finance; or (c) directly or indirectly exercise a controlling influence over any firm or organization that provides the services that you do not provide? YES NO

If yes, please identify each firm/organization and include the following information:

<u>Firm/Organization</u>	<u>Phone</u>	<u>Services Provided with the Firm/Organization</u>

I. Identify all individuals/firms/organizations with whom you have an agreement, understanding, or relationship of any kind (formal or informal) pursuant to which such individual, firm or organization solicits or recommends players to use your services:

<u>Name</u>	<u>Phone</u>	<u>Compensation/Consideration for Solicitation/Referral</u>

J. Identify all individuals/firms/organizations whom you have provided any form of compensation or consideration (e.g., salary, fees, expenses, etc.) during the previous three years for efforts they have made to solicit, recommend or refer players to you or your organization:

<u>Name</u>	<u>Phone</u>	<u>Compensation/Consideration for Solicitation/Referral</u>

K. Do you bill the player for your expenses in connection with the services referred to in J? YES NO

If yes, on what basis do you bill the player (e.g., itemize out-of-pocket, daily rate, or other basis)?

L. Do you allocate any expenses among various clients? YES NO

If yes, identify the expenses and describe your method of allocation:

M. How and when are you paid?

N. Who actually negotiates contracts on behalf of the athlete?

O. What is the duration of the agreement between you and the athlete?

P. What if you or the athlete want to terminate the agreement?

Q. What happens to the agreement if the athlete is waived from a team?

R. Do you limit your number of clients? YES NO Please explain:

Section 8: RELATED BUSINESS AND PERSONNEL

A. Please provide the requested information for each firm or organization with which you are currently affiliated and indicate where the business of representing professional athletes is customarily conducted:

<u>Name</u>	<u>Address</u>	<u>Phone</u>

B. If any entry in 8A. above is a partnership, list the name of each partner below. If any entry in 8A. above is a corporation, list the name of each officer and member of the board of directors. Please designate those partners, officers or members of the board of directors who customarily perform work for professional athletes:

C. List each person not named in 8B. who: (a) has a significant ownership interest in your firm or organization; (b) has wholly or partially financed your firm or organization (other than financing or credit extended in the ordinary course of business by lending institutions); or (c) directly or indirectly exercises or has the power to exercise a controlling influence over the management of your firm or organization:

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship*</u>

* describe the ownership interest, amount of financing, and/or basis of controlling interest

D. Describe fully the nature of each of your firm(s) and organization(s) listed in 8A.:

Section 9: REFERENCES

A. Please provide a list of three current client references. For each, provide the information requested below:

<u>Name</u>	<u>Organization</u>	<u>Phone/E-mail</u>

Section 10: ATTACHMENTS

A. Please attach to this registration form a list of all athletes, coaches, and sport administrators that you represent or have represented in the past five years in contract negotiations and other services you provide (e.g., marketing and promotions, financial planning, etc.). Please include on the list for each person the dates of such representation, their sport, and the team(s)/organization(s) involved.

B. Please attach to this registration any marketing/promotional materials you may wish to pass along to current student-athletes.

C. Please attach a current resume.

Section 11: ACKNOWLEDGMENT

I, _____, hereby request registration with the Old Dominion University Agent & Advisor Program.

I agree all statements, agreements, and representations made in this application and its attachments are accurate as of my application date and are made for the benefit of Old Dominion University and its student-athletes, both present and future, and that the information herein is public information and may be provided by Old Dominion University to its student-athletes, their families, and others.

Registrant's Name (Please Print)

Date

Registrant's Signature