

Please complete this form in its entirety.

I) GENERAL INFORMATION

Name: _____

Email: _____ Business Phone: (____) _____

Name of Firm/Agency: _____

II) PROFESSIONAL SERVICES

General services performed for client-athletes (check those that apply and indicate fee charged):

Playing Contract Negotiations: Yes No Percentage or Hourly Fee: _____

Endorsement Contract Negotiations: Yes No Percentage or Hourly Fee: _____

Legal Assistance: Yes No Percentage or Hourly Fee: _____

Financial Planning: Yes No Percentage or Hourly Fee: _____

Tax Consulting: Yes No Percentage or Hourly Fee: _____

Investment Consulting: Yes No Percentage or Hourly Fee: _____

Estate Planning: Yes No Percentage or Hourly Fee: _____

Other: Yes No Percentage or Hourly Fee: _____

If any other individuals, firms, or agencies assist you in providing these services for client-athletes, please list their contact information:

Name	Firm/Agency	City	State	Phone

Name	Firm/Agency	City	State	Phone

Name	Firm/Agency	City	State	Phone

III) EXPERIENCE

Number of years' experience as a sports agent/representative: _____

Please list the sport(s) in which you currently represent athletes:

Sport:

Please list the number of contracts (both overall and current) you have negotiated while serving as a sports agent/representative and list the applicable sport. Please exclude athletes on the practice squad.

Sport:

Overall Contracts:

Current Contracts:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please provide three athlete client references:

Athlete Name

Most Recent Team

Contact (email or phone)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Post graduate Degree(s):

College/University:

Degree Type:

_____	_____
_____	_____
_____	_____

Admitted to Bar (If applicable)

Yes _____ No _____
State _____ Date Admitted to Bar _____ License # _____

IV) OTHER QUALIFICATIONS

Current membership(s) in professional organizations: _____

Occupational or professional licenses (certified public accountant, chartered life underwriter, etc.) and date obtained:

License Type:	Date obtained:
_____	_____
_____	_____
_____	_____

Are you currently registered with any state as an agent/representative? _____
Yes No

If yes, what state(s): _____

Are you currently certified by the NFLPA? _____
Yes No

If no, please explain why: _____

Are you currently certified by the NBPA? _____
Yes No

If no, please explain why: _____

Are you currently certified by the MLBPA? _____
Yes No

If no, please explain why: _____

Are you currently certified as in intermediary with the USSF? _____
Yes No

If no, please explain why: _____

Do you earn income from work performed in some capacity other than as a sports agent/representative?

____ Yes ____ No

If yes, describe other occupation(s) or service(s) for which you are paid:

V) PREVIOUS EMPLOYMENT (most recent two positions)

Firm/Agency:_____	Position:_____
Address:_____	_____
City State Zip	Date(s) of employment
Contact information:_____	_____
Email	Business phone

Firm/Agency:_____	Position:_____
Address:_____	_____
City State Zip	Date(s) of employment
Contact information:_____	_____
Email	Business phone

VI) PROFESSIONAL REFERENCES

Name:_____ Position:_____

Contact information:_____

Email Business phone

Name:_____ Position:_____

Contact information:_____

Email Business phone

Name:_____ Position:_____

Contact information:_____

Email Business phone

Please indicate which current Virginia Tech student-athlete(s) you plan to contact:

_____	_____
_____	_____
_____	_____
_____	_____

I certify that the above information is true, correct and complete to the best of my knowledge. Further, I certify that I will notify Bridget Brugger McSorley, Assistant Athletics Director, before my first contact with any student-athlete who has eligibility remaining and is enrolled at Virginia Tech.

In addition, I have reviewed the NCAA regulations regarding agents, as well as the policies and procedures contained in the Virginia Tech Student-Athlete Agent Program. I have not engaged in any activity or behavior that would jeopardize a student-athlete's collegiate eligibility.

I certify that I will comply with the policies of the Virginia Tech Student-Athlete Agent Program and all applicable NCAA legislation. I understand that failure to do so will result in the initiation of proceedings to disassociate me from Virginia Tech, as well as prevent any other person(s) representing my firm or company from contacting Virginia Tech student-athletes in the future.

Name (please print): _____

Date: _____

Signature: _____

Please Return Completed Form to:

Bridget Brugger McSorley
Assistant Athletic Director for Compliance
Virginia Tech
360 Jamerson Athletic Center
Blacksburg, VA 24061
mcsorlbb@vt.edu

Agent Registration Renewal

1.) I was approved for the 2017-18 Virginia Tech Agent Registration Program.

YES

NO

2.) There have been changes to my information since my 2017-18 approval (if NO, please proceed to #3, if YES please update the information on this form).

YES

NO

3.) *I certify there have not been any changes to my information since my 2017-18 approval.*

YES

Please sign below if you answered yes to #3.

Signature: _____

Date: _____