



## OLD DOMINION UNIVERSITY COMPLIANCE OFFICE

Guidelines for Agents, Financial Advisors and  
Professional Representatives

The Department of Athletics has created specific guidelines for agents, financial advisors and professional representatives to follow, with hopes to prevent any misconduct on behalf of our student-athletes, which could render them ineligible and subject Old Dominion University to NCAA violations and/or sanctions.

Please read and understand the following rules and regulations regarding agents and representatives:

### NCAA Rules for Use of Agents

**1.1.1 General Rule.** An individual shall be ineligible for participating in an intercollegiate sport if he or she ever has agreed (orally or in writing) to be represented by an agent for the purpose of marketing his or her athletics ability or reputation in that sport.

**12.3.1.1 Representation for Future Negotiations.** An individual shall be ineligible per Bylaw 12.3.1 if he or she enters into a verbal or written agreement with an agent for representation in future professional sports negotiations that are to take place after the individual has completed his or her eligibility in that sport.

**12.3.1.2 Benefits from Prospective Agents.** An individual shall be ineligible per Bylaw 12.3.1 if he or she (or his or her relatives or friends) accepts transportation or other benefits from:

- (a) Any person who represents any individual in the marketing of his or her athletic ability. The receipt of such expense constitutes compensation based on athletic skill and is an extra benefit not available to the student body in general; or
- (b) An agent, even if the agent has indicated that he or she has no interest in representing the student-athlete in the marketing of his or her athletic ability or reputation and does not represent individuals in the student-athlete's sport.



### Verification Statement

I certify that all information provided is true, correct and complete to the best of my knowledge. Further, I certify that I will notify Jeff Wilson, Assistant Athletic Director at Old Dominion University, prior to the first contact with a student-athlete who has eligibility remaining in any sport and enrolled at Old Dominion University or before the first contact with the student-athlete's coach. I have reviewed the NCAA rules and regulations that accompany this form.

Before signing the registration form, I have read the Old Dominion University rules and regulations concerning student-athletes and agree to be bound by and conform to this policy. I have not engaged in ANY activity prior to a student-athlete's agreement to be represented that would jeopardize the student-athlete's eligibility. I also understand that failure to comply with the terms of this certification and the applicable NCAA legislation may result in the initiation of legal proceedings by Old Dominion University and the assessment of civil and/or criminal penalties.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return completed form to:**

**Old Dominion University  
Athletics Compliance Office  
Athletic Administration Building  
Norfolk, VA 23529-0201**

**Or via fax:**

**757-683-5377**

**Attn: Athletics Compliance Office**



## Agent Registration Form

**THIS FORM MUST BE COMPLETED IN ITS ENTIRETY**

### General Information (please print)

Full Name (Last, First, Middle):		Date of Birth:
Social Security No.:	Telephone No.:	
<b>If affiliated with a particular firm as a player-agent, please indicate the following:</b>		
Name of Firm / Agency:		
Business Address (Street, City, State, Zip):		
Business Phone:		
Business Fax:	Cell Phone No.:	E-Mail:

### Associates

Name and Title:	Certifications (Indicate Yes or No): NFLPA: ___ Yes ___ No      NBPA: ___ Yes ___ No      MLBPA: ___ Yes ___ No		
Address (Street, City, State, Zip):			
Telephone No:	Cell Phone No.:	E-Mail:	

Name and Title:	Certifications (Indicate Yes or No): NFLPA: ___ Yes ___ No      NBPA: ___ Yes ___ No      MLBPA: ___ Yes ___ No		
Address (Street, City, State, Zip):			
Telephone No:	Cell Phone No.:	E-Mail:	

### Educational Background

High-School (School, City, State):	Year Graduated:
College (School, City, State):	
Degree(s) Awarded and Year:	
Admitted to Bar (if applicable): ___ Yes ___ No      State: _____      Date: _____	

### Experience

Number of Years as a player-agent:
Sports in which you currently represent athletes & total number of athletes in each sport:

## Other Qualifications

Current Memberships in professional organizations:
Occupational or professional licenses and date obtained:
Are you a currently certified by the NFLPA: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Permanent <input type="checkbox"/> Provisional
Are you a currently certified by the NBPA: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Permanent <input type="checkbox"/> Provisional
Are you a currently certified by the MLBPA: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Permanent <input type="checkbox"/> Provisional

## Professional Services

General services performed for client-athletes:	
Playing Contract Negotiations: <input type="checkbox"/> Yes <input type="checkbox"/> No Hourly fee or percentage: _____	
Endorsement Contract Negotiations: <input type="checkbox"/> Yes <input type="checkbox"/> No Hourly fee or percentage: _____	
Legal Assistance:	Financial Planning:
Tax Consulting:	Money Management:

For the services you perform for client-athletes, list the names and addresses of individuals, firms or agencies that assist you in providing these services

Name:
Address (City, State, Zip):

Name:
Address (City, State, Zip):

Name:
Address (City, State, Zip):

Please list the names of any athletes, including Old Dominion University athletes that you previously represented or currently represent and, in team sports, the team/league to which each athlete is currently under contract with. Also indicate the name of the team representative with who you negotiated the contract. Write "none" if you currently do not represent any athlete. If you represent athletes in more than one sport, please provide this information for at least five clients in each sport. (Use additional sheets if necessary)

Player Name	Team	Client Phone	Team

Please list the names of any current Old Dominion University student-athlete you wish to contact during the 2006-07 academic year.


### Previous Employment

Firm / Agency:
Position / Dates of Employment:
Address (Street, City, State, Zip):

Firm / Agency:
Position / Dates of Employment:
Address (Street, City, State, Zip):

### References (3)

Name:
Address (Street, City, State, Zip):
Phone No.:

Name:
Address (Street, City, State, Zip):
Phone No.:

Name:
Address (Street, City, State, Zip):
Phone No.:

I certify that the above information is true, correct and complete to the best of my knowledge. Further, I certify that I will notify Jeff Wilson, Assistant Director of Athletics / Compliance, before the first contact with a student-athlete who has eligibility remaining in any sport and is enrolled at Old Dominion University.

Furthermore, I state that I have not and will not engage in any activity contrary to NCAA regulations. I also understand that failure to comply with the terms of this certification and the applicable NCAA legislation may result in the initiation of legal proceedings by Old Dominion University against me and the assessment of civil and/or criminal penalties to me.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Return completed form to: Jeff Wilson, Assistant Director of Athletics/Compliance  
Old Dominion University  
Athletic Admin. Building  
Norfolk, VA 23529-0201  
FAX: 757-683-5377