

XAVIER UNIVERSITY
2006-2007 AGENT REGISTRATION UPDATE

The completion of this form is required for registration in the Xavier University Player-Agent Program.

Please print or type

Name: _____ Date of Birth: _____

SS#: _____ Phone: _____

Home Address: _____

If affiliated with a particular firm or agency as a player-agent, please indicate:

Name of firm: _____

Firm Address: _____

Business Phone: _____

e-mail: _____

I certify that the above information is true, correct and complete to the best of my knowledge.

Further, I certify that I will notify the Xavier University Compliance Office before first contact with a student-athlete who has eligibility remaining in any sport and is enrolled at the Xavier University.

Furthermore, I have reviewed the Ohio Agent Law and NCAA rules that accompany this form and have not engaged in any activity that would jeopardize a student-athlete's eligibility for intercollegiate athletics. I also understand that failure to comply with the terms of this certification and the applicable State of Ohio and NCAA legislation may result in the initiation of legal proceedings by the University of Cincinnati against me and the assessment of civil and/or criminal penalties to me.

Signature: _____ Date: _____

Return completed form to: George Rathman, Compliance Coordinator
Xavier University
3800 Victory Parkway
Cincinnati, OH 45207-6004
(513) 745-2855
(513) 745-3733 (fax)
rathman@xavier.edu