



SPORTS AGENT REGISTRATION QUESTIONNAIRE

Please read the Lipscomb University Athlete Agent Policy and applicable Tennessee state law prior to filling out this form. Complete the following form to register with Lipscomb University Athletics Compliance Office.

I. General Information

Agency Name: _____

Names of Agent/Representative: _____

Agency Address: _____

City, State ZIP: _____

Phone: _____ Fax: _____

Agent Cell Phone: _____

E-mail: _____

II. Educational Background

Please list all institutions attended, along with dates attended and degrees earned.

High School: _____

Month/Year Graduated: _____

College(s): _____

Location: _____

Degrees(s)/Year Graduated: _____

Graduate/Legal School: _____

Location: _____

Degree Awarded/Year: _____

Admitted to the Bar?: Yes No

III. Sport Representation

List the sports for which your agency provides representation:

Baseball Men's Basketball Women's Basketball

Men's Golf Women's Golf

Other sports represented: _____

IV. Agent Information

Are you presently certified by the NBPA? Yes No Permanent Provisional

Are you presently certified by the MLBPA? Yes No Permanent Provisional

List any other occupational or professional licenses and the dates on which they were obtained:

How many years of experience do you have representing client-athletes? _____

Please identify the following services you provide for client athletes:

Contract Negotiation

Appearance/Endorsements

Estate Planning

Financial Planning

Grievance Arbitration

Legal Assistance

Tax Planning

Other services provided for client-athletes: _____

Hourly fee or percentage for appearance/endorsements? _____

Do you offer a separate contract for each of the services identified in this section? Please elaborate:

Do you handle players' funds? Yes No

If yes, are you bonded? Yes No

For the services you perform for client-athletes, list the names and addresses of individuals, firms, or agencies which assist in providing these services: (you may submit a separate document if easier):

Describe your fee structure: _____

Are your fees negotiable? Yes No

Under what conditions may a client terminate a contract? _____

Have you been accused of participating in any action alleged to have been in violation of the rules of the NCAA, any Conferences, or any university or college? Yes No

If yes, indicate the nature of the complaint or charges, the results of any investigation, and any other information you believe is relevant: _____

Do you limit the number of clients you represent? Yes No If yes, please elaborate:

How many clients do you currently represent? _____

Please list the names and phone numbers of three athletes you currently represent or have represented who may be contacted by the Lipscomb Compliance Office or a Lipscomb student-athlete: _____

Please list the current Lipscomb University student-athletes you plan to contact:

V. Certification

I certify that the above information is true, accurate, and complete to the best of my knowledge. Furthermore, I certify that I will notify the Lipscomb Compliance Office before the first contact with a student-athlete who has eligibility remaining in any sport and is enrolled at Lipscomb University. I have reviewed the Agent Policy, applicable law, and NCAA rules and regulations and have not engaged in any activity that would jeopardize the eligibility of a Lipscomb University student-athlete. I understand that failure to comply with the terms of this certification, law and the applicable NCAA legislation may result in the initiation of legal proceedings by the University against me and the assessment of civil and/or criminal penalties to me.

I have read and agree to the above: Yes No

Signature

Date

Agent Registration Checklist:

- I have received, read, and understand all information included in the Athlete Agent Policy and Information.
- Completed and Signed the Application for Sports Agent Registration.
- Completed and Signed the Sports Agent Registration Questionnaire.
- Attached copies of all licenses, certifications, etc. as proof of my registration and approval to perform the professional duties indicated in the Sports Agent Registration Questionnaire.