



STATE OF ALABAMA

OFFICE OF SECRETARY OF STATE

P.O. Box 5616
MONTGOMERY, AL 36103-5616
www.sos.state.al.us

JOHN H. MERRILL
SECRETARY OF STATE

APPLICATION FOR REGISTRATION AS AN ATHLETE AGENT

(VALID FOR TWO YEARS)

✓ Check One (Fees are non-refundable)

\$200 INITIAL APPLICATION FEE

\$100 RENEWAL LICENSE FEE

\$100 INITIAL APPLICATION FEE
BASED ON REGISTRATION OR
LICENSE FROM ANOTHER STATE

\$100 RENEWAL BASED ON
REGISTRATION/LICENSE
FROM ANOTHER STATE

APPLICATION SHOULD BE TYPED OR PRINTED

1 Name: Last First Middle

2 Home Address: Street City State Zip Code

3 Principal Business Address: Street City State Zip Code

4 Name/Address of Affiliation (if applicable): Street City State Zip Code

5 Your Email Address Your Home Telephone Number Your Business Telephone Number

6 List Three (3) References (Not Related to Applicant and Not Current Office Co-worker) Must Be Current and Accurate

Name Address Telephone Number

Name Address Telephone Number

Name Address Telephone Number

ANSWER ALL QUESTIONS COMPLETELY

7	GENERAL				
Have you ever been known by any other name or surname? <div style="text-align: center;">Yes No</div> If your answer is "Yes" please state all names used and when so used: (If more space is needed use reverse side.)	Name of your Spouse: <hr/> Name of Spouse's Employer: <hr/> Street Address <hr/> City State Zip Code <hr/> Does your Spouse have any business relationship with any professional sport or professional sports team? Yes No <hr/> If your answer is "Yes" please provide details of said relationship: 				
Your date of Birth: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">(Mo)</td> <td style="width: 33%; text-align: center;">(Day)</td> <td style="width: 33%; text-align: center;">(Yr)</td> </tr> </table>	(Mo)	(Day)	(Yr)	Place of Birth: (City and State) If a married woman, please state your maiden name:	
(Mo)	(Day)	(Yr)			

8	EDUCATION: HIGH SCHOOL GRADUATE OR GED? YES NO			
Name and location of high school attended: Name and location of Colleges and Universities Attended: Name and location of Law or Other Graduate School Attended:	From (Mo) (Yr)	To (Mo) (Yr)	Did you Graduate?	Date of Graduation Degree and Date Degree and Date

9	EMPLOYMENT: (Check one) I am currently Employed Self-Employed	
Name and Address of <i>Employer</i> : Name <hr/> Street Address <hr/> City State Zip Code <hr/> Nature of Business: <hr/> Telephone No. <hr/> Your Title/Position <hr/> Starting Date <hr/> ① Name of Previous Employer: (Last 5 years immediately preceding date of application. Use additional sheets as necessary) <hr/> Employer <hr/> Street Address City State Zip Code <hr/> Your Title/Position <hr/> Start Date <hr/> Ending Date	If <i>Self-Employed</i> complete the following: Name <hr/> Street Address <hr/> City State Zip Code <hr/> Nature of Business <hr/> Starting Date Telephone No. <hr/> ② Name of Previous Employer: (Last 5 years immediately preceding date of application. Use additional sheets as necessary) <hr/> Employer <hr/> Street Address City State Zip Code <hr/> Your Title/Position <hr/> State Date <hr/> Ending Date	

10 BUSINESS/CORPORATION:

If a *corporation employs you as an athlete agent* then provide the names and addresses of the officers, directors, and any shareholders of the corporation having an interest of five percent (5%) or greater. (Use additional sheets if necessary)

If your business as an athlete agent *is not a corporation* then provide the names and addresses of all partners, members, officers, managers, associates or profit-sharers of the business. (Use additional sheets if necessary)

(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

11 Have you or any person named in question #10 above ever been convicted of a crime that, if committed in this state, would be a crime involving moral turpitude or a felony? Yes No

If "Yes" then identify the crime: _____

12 Has there ever been a judicial or administrative determination that you or any person named in question #10 above has made a false, misleading, deceptive, or fraudulent representation? Yes No

13 Has your conduct or that of any person named in question #10 above ever resulted in the imposition of a sanction, suspension, or declaration of ineligibility to participate in an interscholastic or intercollegiate athletic event on a student-athlete or educational institution? Yes No

14 Has there ever been a sanction, suspension, or disciplinary action taken against you or any person named in question #10 above arising out of occupational or professional conduct? Yes No

15 Has there ever been any denial of an application for, or suspension or revocation of, or the refusal to renew the registration or licensure of yourself, or any person who is named in question #10 above as an athlete agent in any state? Yes No

16 PRACTICAL EXPERIENCE/FORMAL TRAINING AS ATHLETIC AGENT:

Provide in detail a description of your formal training, practical experience, and educational background relating to your professional activities as an athletic agent: (attach additional sheets if necessary)

