



JOHN THURSTON
Arkansas Secretary of State
State Capitol Suite 26
500 Woodlane Street
Little Rock, Arkansas 72201-1094
501-682-1010 • 800-482-1127

ARKANSAS ATHLETE AGENTS REGISTRATION APPLICATION
(Valid for two years)

New License Fee: \$500.
(\$100 if based on application
from another state)

Renewal Fee: \$500.
(\$100 if based on renewal
from another state)

DATE: _____

1. Name of individual applicant _____
(first) (last) (mi)

2. Name of applicant's business or employer: _____

3. Physical address of principal place of business _____
(street)

(city) (state) (ZIP) (phone number)

4. List all businesses or occupations in which you have engaged for the five (5) years preceding the date of this application:

(business, occupation) (address)

(business, occupation) (address)

(business, occupation) (address)

(business, occupation) (address)

(business, occupation) (address)

Athlete Agent Registration Application
Page 2

5. Provide a description of your formal training, practical experience and educational background relating to your professional activities as an athlete agent:

6. Provide the names and addresses of three (3) references not related to you:

(name) (address)

(name) (address)

(name) (address)

7. If your business as an athlete agent is not a corporation, provide the names and addresses of all the partners, members, officers, managers, associates or profit-sharers of the business.

If a corporation employs you as an athlete agent, provide the names and addresses of the officers, directors and any shareholder of the corporation having an interest of five percent (5%) or greater.

(name) (address)

(name) (address)

(name) (address)

(name) (address)

Athlete Agent Registration Application

Page 3

8. Provide the name, sport and last known team for each individual for whom you have acted as athlete agent during the five (5) years preceding the submission of this application:

(name)	(sport)	(last known team)
(name)	(sport)	(last known team)
(name)	(sport)	(last known team)
(name)	(sport)	(last known team)
(name)	(sport)	(last known team)
(name)	(sport)	(last known team)

9. Have you or any person named in Question 7 ever been convicted of a crime involving moral turpitude or any felony? Yes No If yes, identify the crime: _____

10. Has there ever been a judicial or administrative determination that you or any person named pursuant to Question 7 has made a false, misleading, deceptive, or fraudulent representation? Yes No

11. Has your conduct or that of any person named pursuant to Question 7 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

12. Has there ever been any sanction, suspension, or disciplinary action taken against you or any person named pursuant to Question 7 arising out of occupational or professional conduct? Yes No

Athlete Agent Registration Application
Page 4

13. Has there been any denial of your application for, suspension or revocation of, or refusal to renew, your registration or licensure or that of any person named pursuant to Question 7 as an athlete agent in any state? Yes No

I state under penalty of perjury that the information contained in this application is true and correct to the best of my knowledge.

Signature of Applicant

Date

State of _____

County of _____

Signed and Sworn before me, a Notary Public, this _____
(month) (day) (year)

-

Notary Public

My Commission expires:
