Athletes & Agents Disclosure Form
Check All Applicable Items and Provide Contact Information

A. Pursuant to the University’s Athletes and Agents Policy issued February 14, 2011, I:

☐ am a USC Employee/Faculty Member, or Student (including full and part time students, postdoctoral fellows, and graduate students) (“USC Party”),

☐ am a Business entity (including corporations, Partnerships, sole proprietorships, etc.) doing business with the University or interacting with student-athletes at University athletic facilities or venues where student-athletes meet, practice or compete (“Third Party”) [skip to part C],

B. As a USC Party, I am notifying the Vice President for Athletic Compliance that I:

☐ am presently directly or indirectly representing or seeking to represent student-athletes for the purpose of marketing their athletic ability or reputation,

☐ am presently certified, registered and/or licensed as a sports or athlete agent,

☐ am presently working for or at the direction of an individual or entity that is directly or indirectly representing or seeking to represent student-athletes for the purpose of marketing their athletic ability or reputation, or certified, registered and/or licensed as a sports or athlete agent,

☐ have a relative (including a grandparent, parent, sibling, spouse, child, uncle, aunt or cousin by blood or marriage) that is:

☐ directly or indirectly representing or seeking to represent student-athletes for the purpose of marketing their athletic ability or reputation,

☐ certified, registered and/or licensed as a sports or athlete agent.

USC Party Contact Information:

Name: ___________________ Employee ( ), Faculty ( ), Student ( )
Telephone No. _____________
Email Address: ________________
Address: ____________________, ____________________, ________, __________

Relative Information (If Applicable)

Name: ___________________ Relationship: __________________
Telephone No. _____________
Email Address: ________________
Address: ____________________, ____________________, ________, __________

Street       City               State    Zip Code
C. As a Third Party business, the business is:

☐ presently directly or indirectly representing or seeking to represent student-athletes for the purpose of marketing their athletic ability or reputation,

☐ presently certified, registered and/or licensed as a sports or athlete agent,

☐ presently working for or at the direction of an individual or entity that is directly or indirectly representing or seeking to represent student-athletes for the purpose of marketing their athletic ability or reputation, or certified, registered and/or licensed as a sports or athlete agent.

Third Party Contact Information

____________________________________
Business Name

Contact Person: ______________________
Telephone No.: ______________________
Email Address: ______________________
Address: ____________________________, __________, ___________, __________

Street            City           State    Zip Code

☐ By checking this box, I acknowledge reading the USC Athletes and Agents Policy and agree to abide by all rules and regulations set forth in herein; and, if I have provided notice regarding a relative known to be a Sports or Athlete agent and I am aware of a planned visit to USC by such relative, I will provide the USC Office of Athletic Compliance 24 hours email or telephonic advance notice prior to the arrival on campus by any such relative.

Upon completion of this form, please

Email: dave.roberts@usc.edu,
Fax: (213) 821-5581, or
Personally deliver the form to: USC Office of Athletic Compliance
840 Childs Way, BKS 402
Los Angeles, California 90089