

AFFIDAVIT OF ATHLETE AGENT

STATE OF: _____

COUNTY OF: _____

I, _____, OF _____
(APPLICANT) (NAME OF ATHLETE AGENT ORGANIZATION)

CERTIFY THAT I AS AN ATHLETIC AGENT HAVE NOT ENTERED INTO ANY ORAL OR WRITTEN PROFESSIONAL SPORTS SERVICES CONTRACTS WITH ANY STUDENT ATHLETE AS DEFINED BY THE PENNSYLVANIA ATHLETE AGENT ACT, NOR HAVE I GIVEN, OFFERED OR PROMISED ANYTHING OF VALUE TO A STUDENT ATHLETE, ANY MEMBER OF THE STUDENT ATHLETE'S IMMEDIATE FAMILY, OR ANY INDIVIDUAL WHO SUBSTANTIALLY CONTRIBUTES TO THE ECONOMIC SUPPORT OF THE STUDENT ATHLETE. I CERTIFY THAT I HAVE NOT GIVEN, OFFERED, OR PROMISED ANYTHING OF VALUE TO ANY EMPLOYEE OF AN INSTITUTION OF HIGHER EDUCATION IN RETURN FOR A REFERRAL OF A STUDENT ATHLETE BY THE EMPLOYEE.

I ALSO CERTIFY THAT ALL INFORMATION SUPPLIED IN THE ENCLOSED APPLICATION FOR REGISTRATION IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20 ____

AFFIX
NOTARY
SEAL
HERE

NOTARY PUBLIC SIGNATURE

PRINTED OR TYPED NAME OF NOTARY PUBLIC

MY COMMISSION EXPIRES: _____