

Contact Information

Kansas Secretary of State
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**KANSAS SECRETARY OF STATE
Athlete Agent Registration**

AA

81

All information must be completed or this document will not be accepted for filing.

Please check the following:

New registration _____

Renewal registration _____

Name of applicant (must be an individual):

Applicant's principal business address:

Street address

City

State

Zip

Telephone number: _____

Name of Applicant's business or employer (if applicable): _____

Type of entity (Check one)

_____ Individual _____ Corporation _____ Association _____ Partnership _____ LLC _____ Other

Instructions

Filing Fee: \$515.00

- List the business(es) or occupation(s) engaged in for the five years immediately preceding the application or renewal request date (Appendix A).
- List all formal training, practical experience and educational background relating to applicant's professional activities as an athlete agent (Appendix B).
- Names and addresses of three (3) individuals not related to the applicant willing to serve as references (Appendix C).
- List the name, sport and last known team for each individual for whom the applicant acted as an athlete agent during the five years immediately preceding the date of this application or renewal request (Appendix D).
- List names and addresses of all persons who are partners, members, officers, managers, associates or profit-sharers with respect to the athlete agent's business or employer if it is not a corporation. If the applicant is employed as an athlete agent by a corporation, list the names and addresses of all officers and directors, and any shareholder of the corporation having a five percent (5%) or greater interest (Appendix E).
- Please answer all of the questions listed in Appendix F for the applicant and each person identified in #5 above, include appropriate explanations when indicated.
- Sign and date the application or renewal request under penalty of perjury.
- An individual holding a certificate of registration or licensure as an athlete agent in another state may submit a copy of that application and certificate in lieu of completing this application, **provided that:** 1) the other state's application was submitted to that state within six (6) months immediately preceding the date of the application to this state; 2) the applicant certifies that the information in the other state's application is current; 3) the information in the other state's application contains information substantially similar to or more comprehensive than that required in an application submitted to this state; and 4) the other state's application was signed under penalty of perjury (Appendix G).

Notice: There is a \$25 service fee for all returned checks.

Do not write in this space

Appendix A

Use additional sheets as necessary

List the business(es) or occupation(s) the applicant engaged in for the five years immediately preceding the date of this application or renewal request.

Business or occupation: _____

Address: _____
Street address City State Zip

Dates: _____

Duties: _____

Name of supervisor: _____

Business or occupation: _____

Address: _____
Street address City State Zip

Dates: _____

Duties: _____

Name of supervisor: _____

Business or occupation: _____

Address: _____
Street address City State Zip

Dates: _____

Duties: _____

Name of supervisor: _____

Appendix B

List all of the applicant's formal training, practical experience and educational background relating to professional activities as an athlete agent.

Formal training:

Description/dates/location/contact (include telephone number):

Practical experience:

Description/dates/location/contact (include telephone number):

Educational background:

School(s)/dates/degree or certification:

Appendix C

Names and addresses of three (3) individuals not related to the applicant willing to serve as references.

Name: _____

Address: _____
Street address City State Zip

Name: _____

Address: _____
Street address City State Zip

Name: _____

Address: _____
Street address City State Zip

Appendix D

Use additional sheets as necessary

List the name, sport and last known team for each individual for whom the applicant acted as an athlete agent during the five years immediately preceding the date of this application or renewal request.

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: _____

Name: _____

Sport: _____ Last known team: _____

Appendix E

Use additional sheets as necessary

List names and addresses of all persons who are partners, members, officers, managers, associates or profit-sharers with respect to the athlete agent's business if it is not a corporation. If the applicant is employed as an athlete agent by a corporation, list the names and addresses of all officers and directors, and any shareholder of the corporation having a five percent (5%) or greater interest.

Name: _____

Address: _____
Street address City State Zip

Title or position: _____ Ownership interest (if any): _____

Name: _____

Address: _____
Street address City State Zip

Title or position: _____ Ownership interest (if any): _____

Name: _____

Address: _____
Street address City State Zip

Title or position: _____ Ownership interest (if any): _____

Name: _____

Address: _____
Street address City State Zip

Title or position: _____ Ownership interest (if any): _____

Name: _____

Address: _____
Street address City State Zip

Title or position: _____ Ownership interest (if any): _____

Appendix F

Use additional sheets as necessary

Please answer each of the following questions with regard to the applicant and each person identified in Appendix E. **If any question is answered yes, please provide a detailed explanation on a separate sheet.**

1. Has the conduct of the applicant or any person identified in Appendix E resulted in the imposition of a sanction, suspension or declaration of ineligibility of a student-athlete or educational institution to participate in an interscholastic or intercollegiate athletic event (Yes or No)? _____
2. Has the applicant or any person identified in Appendix E ever been sanctioned, suspended or disciplined as a result of occupational or professional conduct (Yes or No)? _____
3. Has the applicant or any person identified in Appendix E ever had an athlete agent application or renewal request denied (Yes or No)? _____
4. Has the applicant or any person identified in Appendix E ever had an athlete agent registration or license suspended or revoked (Yes or No)? _____
5. Has the applicant or any person identified in Appendix E ever been convicted of a felony, or of a misdemeanor involving moral turpitude (Yes or No)? _____
6. Has the applicant or any person identified in Appendix E ever been administratively or judicially determined to have made a false, misleading, deceptive or fraudulent representation (Yes or No)? _____

I declare under penalty of perjury under the laws of the State of Kansas that the foregoing application is true and correct.

Executed this _____ day of _____, 20____.

Month

Year

Applicant's Signature

