ATHLETE AGENT REGISTRATION INFORMATION

This information is intended as an aid to the Athlete Agent in completing the provisions required by law, pursuant to 70 O.S., Sec. 821.85 et seq. For further requirements and clarification please consult the Oklahoma Statutes.

A written application for registration or renewal certificate of an Athlete Agent must be made on the attached forms and filed with the Oklahoma Secretary of State as required by law.

The application for registration, or renewal registration is valid for two years from the date of filing.

FILING FEE

A filing fee of One Thousand Dollars ($1,000.00) must accompany the application and shall be paid by the Athlete Agent requesting the certificate. The fee shall be made payable to the Oklahoma Secretary of State.

APPLICATION FOR REGISTRATION
OF ATHLETE AGENT
Filing fee: $1,000.00

TO: OKLAHOMA SECRETARY OF STATE
421 N.W. 13th, Suite 210
Oklahoma City, Oklahoma 73103
(405) 522-2520

☐ Initial Registration ☐ Renewal Registration

Pursuant to Title 70 O.S. Sec. 820.1 et seq., the undersigned hereby submits the following application:

1. Name of Applicant: _____
   Date of birth:_____ Place of birth:_____
   Work phone: _____ Mobile phone: _____
   Electronic communication (fax #, e-mail address, personal/business/employer websites):
   _____

2. Name of Applicant's business or employer:_____
   Mailing address:_____
   Telephone:_____ Nature of business:_____

3. Social-media account(s) affiliated with applicant's business or employer:
   _____
   _____

4. Each business/occupation applicant engaged within five (5) years before the date of this application: _____
   _____
   _____

5. Applicant's:
   A. Formal Training:_____

   B. Practical Experience:_____

   C. Educational background in the subjects of contracts, contract negotiation, complaint resolution, arbitration or civil resolution of contract disputes, federal income taxation and federal estate planning:

   _____

   _____

6. Names of each student athlete for whom the applicant acted as an athlete agent within five (5) years before the date of the application. (If individual is a minor, the name of parent/guardian of the minor, athlete's sport and last known team):

_____

_____

_____

_____

_____

7. Name and address of each person that is a partner, member, officer, manager, associate or profit sharer or directly or indirectly holds an equity interest of five percent (5%) or greater of the athlete agent's business if it is not a corporation AND each person that is an officer or director of a corporation employing the athlete agent or a shareholder having an interest of five percent (5%) or greater in the corporation:

_____

_____

_____

8. Description of the status of any application by the applicant or any person named under #7 for a state or federal business, professional or occupational license, other than as an athlete agent, from a state or federal agency including any denial, refusal to renew, suspension, withdrawal or termination of the license and any reprimand or censure related to the license:

_____

_____

9. Has the applicant or any person named under #7 plead guilty or no contest to, has been convicted of, or has charges pending for, a crime that would involve moral turpitude or be a felony if committed in this state? Yes ☐ No ☐

If yes, explain:

Crime:_____ Law enforcement agency involved:_____

Date of conviction and fine/penalty imposed (if applicable):_____

10. Has the applicant or any person names under #7 been a defendant or respondent in a civil proceeding including a proceeding seeking a judicial determination of incapacity pursuant to Sections 3-101 through 3-115 of Title 30 of the Oklahoma Statutes and, if so, the date and a full explanation of each proceeding, within fifteen (15) years before the date of application? Yes ☐ No ☐

11. Does the applicant or any person named under #7 have an unsatisfied judgment or a judgment of continuing effect including alimony or a domestic order in the nature of child support, which is not current at the date of the application? Yes ☐ No ☐

12. Within ten (10) years before the date of application, was the applicant or any person named under #7 adjudicated bankrupt or was an owner of a business that was adjudicated bankrupt? Yes ☐ No ☐

13. Any administrative or judicial determination that the applicant or any person named under #7 made a false, misleading, deceptive or fraudulent representation?
Yes ☐ No ☐

14. List each instance in which conduct of the applicant or any person named under #7 resulted in the imposition of a sanction, suspension or declaration of ineligibility to participate in an interscholastic, intercollegiate or professional athletic event on a student athlete or a sanction on an educational institution:

- _____
- _____
- _____

15. List each sanction, suspension or disciplinary action taken against the applicant or any person named under #7 arising out of occupational or professional conduct:

- _____
- _____
- _____

16. Previously denied application for suspension or revocation of, refusal to renew, or abandonment of, the registration of the applicant or any person named under #7 as an athlete agent in any state? Yes ☐ No ☐

17. List each state in which the applicant is currently registered as an athlete agent or has applied to be registered as an athlete agent:

- _____
- _____

18. If applicant is certified or registered by a professional league or players association:

- Name of league or association: _____
- Date of certification or registration / date of expiration of certificate or registration (if any): _____
- Date of denial of application (if applicable): _____

EXECUTION AND ACKNOWLEDGMENT

I, the undersigned, under penalty of perjury, have caused this registration to be executed this ___ day of _____, _____; and that the contents of the application are true and complete.

_____

Signature of Applicant

Oklahoma Secretary of State
Request to receive documents electronically

No need to wait on your filed documents to be mailed back to you. If you would like your filed documents returned electronically, please complete and attach this form to your documents. Complete ALL information below to receive an email which will contain a link to retrieve your filed documents. (Please print or type clearly.)

☐ **Return filed documents electronically**

Receipt will read as follows:

PERSONAL or BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP CODE: _____

PHONE OR CELL: _____

EMAIL ADDRESS: _____

(It is critical that the email address is correct, or you may not receive the notification of filing)