

## AAM APPLICATION FOR MEMBERSHIP

l,					
	(Full Name)		Social Security#/Country ID#		
(Business Name)		(Address)		(Zip)	
(Country)	(Email)	(Telephone)	(Cell)	(Fax)	

Hereby apply for membership as an AAM Member pursuant to the Bylaws and Code of Conduct for AAM Members. I recognize that the AAM is not a labor organization, but rather is a professional association dedicated in part to protecting the individual contracting rights of Track & Field Athletes and the Sport.

By making and signing this application, I voluntarily agree to be bound by and conform to the Bylaws and Code of Conduct and that my employees and partners will be bound by the same. I ask that my answers to the following questions be considered as part of this application. I recognize that making any false or misleading statements of a material nature in this application may lead to denial or revocation of my membership in the AAM to athletes who request it.

I also agree that all statements, agreements, and representations made in this application are made for the benefits of the AAM and the Track & Field Athletes, both present and future, and that the information herein may be provided by the AAM to athletes who request it.

I agree that if I am granted membership I will save and hold harmless the AAM, its officers, employees, and representatives from any liability whatsoever resulting from my acts of commission or omission in providing services to any athlete in connection with his individual compensation negotiations with promoters of track & field meets and endorsers or in connection with any subsequent enforcement of such individual contracts.

PLEASE ANSWER ALL QUESTIONS THOROUGHLY

ame? _Yes _No. If	
(Address)	
onth/Year)	
(Date Attended)	(Degree)
	(Date Attended)

(Date of Employment)

(Name of Business)	(Address)	(Telephone)
(Date of Business Started)	) (If Registered/Where	(Corporation Registration #)
Please list below the na partnership) and their re		g for your entity (company, cor-porati
	ames of employers, addresse had in the past five years:	es, positions held, and dates of all
		es, positions held, and dates of all
		es, positions held, and dates of all
		es, positions held, and dates of all
	had in the past five years:	es, positions held, and dates of all

<ul> <li>Please list any occupational licenses or other similar credentials (i.e., Certified Public Accountant, Chartered Life Underwriter, Registered Investment Adviser, etc.) you have obtained other than college or graduate school degrees, including dates obtained:</li> </ul>
<ul> <li>Are you registered or have you applied to be registered by any state or country which has promulgated statutes regulating athlete agents? Yes No. If yes, list states (or countries) and status of registration:</li> </ul>
<ul> <li>Have you ever been denied an occupation or professional license, franchise, or other similar credentials for which you applied? Yes No. If yes, please explain fully.</li> </ul>
<ul> <li>Do you have currently pending any application for an occupational or professional li-cense, franchise, or other similar credentials? Yes No. If yes, please explain fully</li> </ul>

disqualified Yes	as a member of any profession, or as a holder of any public office?  No. If yes, please describe each such action, the dates of occurrence, ne and address of the authority imposing the action in question:
member of Yes	arges or complaints currently pending against you regarding your conduct as a any profession, or as a holder of public office?  No. If yes, please indicate the nature of the charge or complaint, and the ddress of the authority considering it:
, -	Int to engage in any profession or occupation ever been disqualified, sus-pended or terminated? Yes No. If yes, please explain fully:
<ul> <li>Have you evas-sociation</li> </ul>	ND HISTORY  ver had legal proceedings brought against you by any athlete, athletes  professional sports club, league or federation for any reason?  No. If yes, please explain fully:

<ul> <li>Have you ever been convicted of or pled to a criminal charge, other than minor traffic violations? Yes No. If yes, please indicate nature of offense, date of conviction, criminal authority involved, and punishment assessed.</li> </ul>
<ul> <li>Have you ever been a defendant in any civil proceedings, in which allegations of fraud, misrepresentation, embezzlement, misappropriation of funds, conversion, breach of fiduciary duty, forgery, or legal malpractice were made against you?</li> <li>Yes No. If yes, please indicate nature of offense, and punishment assessed.</li> </ul>
• Have you ever filed for bankruptcy? Yes No. If yes, please provide all details.
<ul> <li>Have you ever been adjudicated insane or legally incompetent by any court?</li> <li>Yes No. If yes, please provide details:</li> </ul>
• Are there any unsatisfied judgments of continuing effect against you (other than ali-mony or child support)? Yes No. If yes, provide full details.

## 6. REFERENCES

1	Please list below the names, current addresses and current telephone numbers of at least three persons, not related to you, who have known you for at least the last three years and can attest to your character.
1	Please list below the names, current addresses, and current telephone numbers of at least two entities which can attest to your financial credit (i.e., credit cards companies, lending nstitutions, etc.):
_	
PI	ROFESSIONAL SPORTS EXPERIENCE
1	Please list below the names of all track and field athletes you are now representing or have represented in the past in individual contract negotiations, indicating the dates of such representation:

<ul> <li>List below the names of any other professional athletes, entertainers, or celebrities you are now representing or have represented in the past, indicating the type of repre-sen- tation, and the employers involved:</li> </ul>
<ul> <li>Do you handle client's funds? Yes No. If so, are you bonded?</li> <li> Yes No. If yes, please provide details as to the amount of the bond, the name and ad-dress of the surety or bonding company, etc.:</li> </ul>
I,
I give my permission to do any and all background checks to verify my competence to be a member of the AAM.
(Signature of Applicant)