

Request for the Use of a Student-Athlete's Name, Photograph, or Image to Raise Funds for a Charitable, Educational, or other Non-Profit Organization



STUDENT-ATHLETE(S) OR TEAM(S) REQUESTED:

ORGANIZATION MAKING THE REQUEST: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

ADDRESS: _____

DESCRIPTION OF THE STUDENT-ATHLETE'S INVOLVEMENT (USE OF NAME/IMAGE):

DESCRIPTION OF CO-SPONSORING AND/OR ADVERTISING (IF APPLICABLE):

ATHLETIC DEPARTMENT CONTACT: _____

I, _____, certify that all of the funds generated by the use of the student-athlete's name, photo or image will distributed directly to the charity or educational agency, and that the agency understands and will adhere to all NCAA rules.

SIGNATURE TITLE DATE

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FOR ATHLETIC DEPARTMENT USE ONLY:

ATHLETIC DIRECTOR (OR DESIGNEE) SIGNATURE

DATE