



SOUTH DAKOTA MINES



Name, Image and Likeness Activity Reporting Form

For: Student-athletes who will be or have been compensated for the use of their names, images and likenesses for promotional purposes.

Action: • To the extent required by state law/executive action and/or institutional policy, student-athletes should report information related to their name, image and likeness activities.

• Reported information should be kept on file in a manner consistent with state law/executive action and/or institutional policy.

• The NCAA will continue its normal regulatory operations but will not monitor for compliance with state law/executive action.

Describe the name, image and likeness activity. What are/were the terms of the agreement or transaction? When will/did the activity begin and end?

How will you be or how were you compensated for participating in the name, image or likeness activity?

List all parties to the agreement or transaction, other individuals and entities, and professional service providers.

Name of Person/Entity	Role	Contact Information



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I affirm, to the best of my knowledge:

o I have confirmed that this activity is consistent with state law/executive action and institutional policy. I understand that I am responsible for determining whether this activity is consistent with state law/executive action, if applicable, and that the NCAA will not interpret state law/executive action and/or institutional policy.

o To the extent required by state law/executive action and/or institutional policy, I have provided complete and accurate information regarding any and all activities involving use of my name, image and likeness, including compensation arrangements and information about individuals and entities involved in the activity.

o Compensation was/is related to actual use of my name, image and likeness and was/is not contingent on enrollment at a particular institution or a substitute for pay for athletics performance.

I acknowledge that my institution, or a designee of my institution, may review the accuracy of this information, and I consent to any investigation, review, or audit. I acknowledge that inaccurate or incomplete disclosure, or failure to cooperate could support a reasonable conclusion that compensation I received constituted an inducement to attend or remain enrolled at a specific school, a substitute for pay for athletics performance or participation, or an otherwise illegitimate source of compensation for use of my name, image and likeness.

Date

Signature of student-athlete

Date

Signature of parent or legal guardian (is student-athlete is a minor)

Name (please print)

Date of birth

Age

Email address

Phone number

Sport(s)