## PROMOTIONAL ACTIVITY REQUEST FORM

This form, when signed by the requesting entity and approved by all appropriate Clemson University Athletics Department officials, allows student-athlete appearance occur as requested by the requesting entity. In submitting this form, the requesting entity recognizes that the following criteria MUST be met in order for a student-athlete appearance request to be considered including:

- 1) The request MUST be submitted to Clemson University Student-Athlete Development (ahines2@clemson.edu) at least four (4) weeks prior to the date of the requested appearance
- 2) The request MUST include a cover letter highlighting the event and the student-athletes purpose at the event
- 3) The request MUST include a fully completed copy of this form and submitted to Student-Athlete Development (ahines2@clemson.edu) for consideration
- 4) If a charitable group, the request MUST include a copy of the group's government recognized 501(c)3 status

If any of the above criteria are not met, the request for a student-athlete appearance will be denied. Please note that Clemson University reserves the right to approve or deny requests regardless of the permissibility of the request under NCAA rules.

TION				
		ddress		
6.6501()0				
Group/Agency Description (check one) – must provide proof of 501(c)3 status  High School K-8 School Clemson Group Charitable Group Commercial Entity  Tax Identification Number				
Charitable Group	Commercial Entity			
Cont	Contact E-mail Address			
Phon	e #	Fax #		
ATION				
How many student-athletes would you like to attend the appearance?				
What team(s) would you like to be involved in the appearance?				
**				
Location of the Appeara	nce	Date & Time of Appearance		
Will student-athletes be provided with any of the following? (circle all that apply)				
Meal Transportation Nominal Gift (please provide an explanation and approximate value of gift)				
Transportation   Transportation   Transportation and approximate value of girl)				
☐ Other (please provide explanation):				
What is the proposed appearances distance (in miles) from Clemson University?				
Purpose for requesting the student-athlete appearance and how will the student-athlete(s) contribute to the event?				
The pool for requesting the state of an area and now with the state of corner are to the events.				
Will the student-athlete appearance result in money being raised?				
If yes, please describe where the proceeds from the donation and/or student-athlete appearance will be distributed:				
	Charitable Group Charitable Group Charitable Group Charitable Group Contact Phone ATION  ATION  Itend the appearance Processing of the Appearance Processing Office Processing of the Appearance Processing of the Appearan	Organization Web Adorf of 501(c)3 status Charitable Group Commercial Entity  Contact E-mail Address  Phone #  ATION  Itend the appearance?  Location of the Appearance  (circle all that apply)  It (please provide an explanation and appearance and how will the student-athlete)  In the student-athlete of the provide and the student-athlete of the student of the stude		

## PROMOTIONAL ACTIVITY REQUEST FORM

SECTION C: NCAA DONATION AND/OR STUDENT-ATHLETE APPERANCE QUESTIONS	
<ol> <li>Please answer the following promotion/donation specific questions:</li> <li>Will the event involve any commercial agencies or sponsors (e.g, Ingles, BB&amp;T, etc)         **If yes, you MUST attach a detailed description of the role of the sponsor**</li> <li>Will the name, likeness or image (including photos) of any student-athlete(s) be used to publicize the appearance through an announcement, advertisement or promotion of the event?         **If yes, you MUST attach a copy of the announcement or advertisement, including internet promotions**</li> <li>Will the appearance involve students who have started 9th grade in any manner?</li> <li>Will the student-athlete appearance be used for fundraising purposes?</li> <li>Will funds raised by the student-athlete appearance directly or indirectly benefit a group?         If yes to #5: Is the group associated with a high school or high school booster group?     </li> <li>Will the funds raised directly or indirectly benefit an individual?         If yes to #6: Is that individual a high school student?     </li> <li>Will the funds raised go directly to a charity?</li> <li>What is the age range of the individuals who will benefit from the funds raised and/or donated items?         Below 9th grade         High School (Grades 9-12         Post Secondary (Graduated from HS, not enrolled at a two year college)     </li> </ol>	Yes       No         Yes       No
SECTION D: GROUP/AGENCY RECOGNITION OF TERMS AND CONDITIONS	
<ul> <li>All contact persons for groups/agencies requesting a student-athlete appearance from the Clemson I Athletics Department are required to recognize the following:</li> <li>Student-athletes may not miss class to make an appearance;</li> <li>Student-athletes must receive written approval from the Life Skills Coordinator and Office of Complian making an appearance;</li> <li>Money derived from a student-athlete appearance may ONLY go directly to an educational, charitable profit agency;</li> <li>Student-athletes may only participate in appearances that do not involve co-sponsorship, advertisement commercial agency;</li> <li>Student-athletes may only accept legitimate and normal expenses such as meals and travel from the insection of Student-athlete name, image, or likeness (including photos) may not be utilized to promote the commercial agency;</li> <li>All appearances must be within reasonable distance from Clemson University's campus, unless in the student of Clemson reserves the exclusive right to approve or deny any student-athlete appearance request based institutional policy or other criteria considered by the institution on a case-by-case basis. Providing all information DOES NOT guarantee that a request will be approved.</li> </ul> I certify that I have filled out this form correctly and accurately to the best of my knowledge. I have read the terms and contrequest to the Clemson Athletics Department and agree to abide by these terms and conditions, along with all NCAA understand that failure to provide accurate information on this form, or failing to abide by the terms and conditions of the and regulations may jeopardize the eligibility of student-athletes or may result in a NCAA violation.	nce Services prior to  a, institutional or non- nt or promotion by a stitution; ercial ventures of any dent-athlete's home town. d on NCAA rules, of the necessary  ditions for submitting this rules and regulations. I
Group/Agency Authorized Representative Signature	Date
SECTION E: INSTITUTIONAL APPROVALS (For Clemson Athletics Use ONLY)  Office of Compliance Services Signature  Approval  Yes  No	Date
Dir. of Student-Athlete Development Signature (or designee)  Approval  Yes No	Date

## PROMOTIONAL ACTIVITY REQUEST FORM

## STUDENT-ATHLETE APPROVAL

I certify that I have reviewed this form and that to the best of my knowledge the donation and/or appearance that I will be involved with is permissible under NCAA rules. I have read the terms and conditions required of donations and/or student-athlete appearances for student-athletes at Clemson University and agree to abide by these terms and conditions, along with all NCAA rules and regulations. I understand that failure to abide by the terms and conditions of this request or NCAA rules and regulations may jeopardize my eligibility or may result in a NCAA violation.

Student-Athlete Signature  Date  Student-Athlete Signature  Date  Student-Athlete Signature  Date	
Student-Athlete Signature  Date  Student-Athlete Signature  Date  Student-Athlete Signature  Date	
Student-Athlete Signature  Date  Student-Athlete Signature  Date	
Student-Athlete Signature Date	
Student-Athlete Signature Date	
Student-Athlete Signature Date	

Please return forms to the Compliance Services Office/ McFadden Building Office Suite 104 (Compliance Lobby)/ Email: CUACS@clemson.edu