

**MSU DEPARTMENT OF INTERCOLLEGIATE ATHLETICS-OFFICE OF COMPLIANCE SERVICES  
PROMOTIONAL ACTIVITY FORM**

The following information must be provided in order to determine the permissibility of a Michigan State University student-athlete's involvement in the activity. Please return the completed form by fax to the Office of Compliance Services attn: Compliance Coordinator @ 517-432-5643 or call 517-432-5510 if you have questions. Thank you for your cooperation !

Sponsoring Agency \_\_\_\_\_

Contact Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

e-mail address \_\_\_\_\_

Is this agency charitable, educational or institutional?      Yes       No

Is this agency certified as a 501C nonprofit agency?      Yes       No

What age group does this agency benefit? (e.g., children, high school, adults) \_\_\_\_\_

Purpose of Event/Activity \_\_\_\_\_

Date, Time and Location of Activity \_\_\_\_\_

Is this a fundraising activity?      Yes       No

If YES, who will receive the proceeds and what will the proceeds be used for ? \_\_\_\_\_

Will there be any commercial sponsorship of the event?      Yes       No

If YES, how is the commercial entity involved in this activity? \_\_\_\_\_

Will there be any advertisement or promotions by a commercial agency or sponsor?      Yes       No

If YES, what type of advertising or promotion will be used in the advertising or promotion? \_\_\_\_\_

Will a student-athlete's name, picture, personal appearance or involvement be used in any advertising or promotion of the activity?      Yes       No

If YES, how will the student-athlete be used in the advertising or promotion? \_\_\_\_\_

Will a student-athlete(s) receive any expenses (e.g., meals, transportation) associated with their involvement in the activity?      Yes       No

If YES, indicate what the student-athlete(s) will receive: \_\_\_\_\_

**PROMOTIONAL ACTIVITIES INVOLVING STUDENT-ATHLETES**

The NCAA rules permit a member institution, a member conference or a charitable or educational agency to use a student-athlete's name picture or appearance to support its charitable or educational activities, provided the following conditions are met:

1. The student-athlete receives written approval to participate from the Director of Intercollegiate Athletics, subject to the limitations on participants in such activities as set forth in the NCAA regulations.
2. The specific activity or project in which the student-athlete participates does not involve co-sponsorship, advertisement or promotion by a commercial agency other than through the reproduction of the sponsoring company's officially registered trademark or logo printed materials such as pictures, posters or calendars. The company's emblem, name, address and telephone number may be included with the trademark or logo. Personal names, messages and slogans are prohibited. The student-athlete's name, picture or appearance cannot be used in any way which would directly or indirectly imply his/her endorsement of a commercial product or service.
3. **The student-athlete does not miss class.**
4. **All moneys derived from the activity or project go directly to the institution, or the charitable or educational agency.**
5. The student-athlete may accept legitimate and normal expenses (e.g., for travel and meals) from the institution, or the charitable or educational agency related to the participation in such activity provided it occurs within Michigan, or if outside the state within a 100-mile radius of MSU's campus.
6. An authorized representative of the charitable or educational agency must sign this release statement ensuring that the student-athletes name, image or appearance is used in a manner consistent with the requirements of this section.
7. **Approval of the activity does not guarantee the appearance of an MSU student-athlete!**

**SPONSORING AGENCY RELEASE STATEMENT**

In signing this form I acknowledge that I have read and agree to abide by the above NCAA regulations regarding the use of a student-athlete's name, picture or appearance in the promotion or involvement of this activity.

\_\_\_\_\_  
Signature of Authorized Agency Representative

\_\_\_\_\_  
Date

**FOR OFFICIAL USE ONLY**

Does this activity meet the requirements of NCAA 12.5.1.1? YES  NO

OCS Signature \_\_\_\_\_ Date \_\_\_\_\_

MSU Contact Person \_\_\_\_\_