

APPENDIX "A"
APPLICATION FOR REGISTRATION AS A CONTRACT ADVISOR

I hereby consent and give my permission to the CFLPA to:

1. List my name, address, phone number, and other pertinent private or personal information included under the Registered Contract Advisors in the Agent section, on the CFLPA web site, www.cflpa.com, and any other web site which the CFLPA designates;
2. Provide the CFL Head Office and all CFL teams with the information referred to in paragraph number one for distribution;
3. Distribute the information referred to in paragraph one as required.

I understand that listing my name, address, and other information referred to in paragraph number one is done for the purpose of:

1. Identifying me as a CFLPA Registered Contract Advisor in full compliance with all the terms and conditions set out in the current CFLPA Regulations Governing Contract Advisors, including the payment of all required fees;
2. Identifying me as a CFLPA Registered Contract Advisor in good standing;
3. Providing the CFL teams with the necessary information required to send me pertinent and important information regarding players, applications, club tryouts, training camps and other information.

I also understand and accept that many people refer to this list, some of whom are current or potential CFL players seeking an agent to represent them in contract negotiations with the CFL member clubs.

I waive any rights I might have had, now have or may have in the future, with respect to any private or personal information referred to in paragraph number one and hereby release the CFLPA and the CFL from any claims under any privacy or other legislation with respect to the aforesaid private or personal information.

I, _____,	_____
(full name)	(Social Security Number/Social Insurance)
_____	() _____ () _____
	(phone) (fax)
_____	_____
(full business address)	(email address)

hereby apply for registration as a Contract Advisor with the C.F.L.P.A. pursuant to the C.F.L.P.A. Regulations Governing Contract Advisors adopted the 12th day of January, A.D. 1985, and amended the 16th day of January, 1987, March 12 and 13, 2004, April 1 and 2, 2011, and amended from time to time thereafter.

Before making and signing this application, I have read the C.F.L.P.A. Regulations Governing Contract Advisors, a current copy of which has been provided to me along with this application form and which is incorporated herein by reference. I agree to be bound by and conform to those regulations.

I ask that my answers to the following questions be considered as part of this application. I recognize that making false or misleading statements of a material nature in this application may lead to denial or revocation of my registration with the C.F.L.P.A. as a Contract Advisor.

I also agree that all statements, agreements and representations made in this application are made for the benefit of the Players and the C.F.L.P.A., both present and future, and that the information herein may be provided by the C.F.L.P.A. to the players in the C.F.L. and Players negotiating with Member Clubs in the C.F.L. I further agree that this

application and the Registration Certificate issued hereto, if one be issued, and the C.F.L.P.A. Regulations Governing Contract Advisors, shall constitute a contract between myself and the C.F.L.P.A.

I also agree and do hereby specifically waive all of my rights with respect to privacy with respect to all questions and answers herein.

I agree to pay to the C.F.L.P.A. the registration fee and the annual fee assessed for Contract Advisors.

I also agree that if any change occurs in an answer to any of the questions in this application, I shall file an amended answer with the C.F.L.P.A. in a prompt manner and in no event more than 60 days from the time of the change in the answer.

PLEASE ANSWER ALL QUESTIONS THOROUGHLY - FOR ALL "YES" OR "NO" ANSWERS, PLEASE WRITE "YES" OR "NO". PUTTING ONLY "Y" OR "N" OR "N/A" WILL RESULT IN APPLICATION BEING RETURNED.

1. GENERAL:

a. Have you ever been known by any other name or surname? _____ (Yes or No)
If so, state all names used and when used:

If a married women, please give your maiden name: _____

b. Date of Birth: _____
c. Birthplace: _____

2. EDUCATION:

a. Law or other graduate school attended:

School: _____ City & State/Prov. _____
Dates of Attendance: From: _____ To: _____
Degree: _____ Date Awarded: _____

b. Colleges or Universities Attended:

School: _____ City & State/Prov. _____
Dates of Attendance: From: _____ To: _____ Degree: _____
School: _____ City & State/Prov. _____
Dates of Attendance: From: _____ To: _____ Degree: _____
School: _____ City & State/Prov. _____
Dates of Attendance: From: _____ To: _____ Degree: _____

c. High School Attended:

School: _____ City & State/Prov. _____
Dates of Attendance: From: _____ To: _____

4. LAWYERS AND LAW GRADUATES: (Cont'd)

If yes, please describe each such action, the dates of occurrence, and the name and address of the authority imposing the action in question:

d. Are any charges or complaints currently pending against you regarding your conduct as an attorney or barrister and solicitor as a member of any profession, or as a holder of public office? _____ (Yes or No)

If yes, please indicate the nature of the charge or complaint and the name and address of the authority considering it:

e. Has your right to practice before any governmental office, bureau, agency, commission, etc. ever been disqualified, suspended, withdrawn, denied, or terminated? _____ (Yes or No)

If yes, please list:

5. OTHER APPLICANTS:

a. Are you a member of any business or professional organizations which directly relate to your occupation or profession? _____ (Yes or No)

If yes, please list:

b. Please list any occupational or professional licenses or other similar credentials (i.e., Certified Public Accountant, Chartered Life Underwriter, Registered Investment Advisor, etc.) you have obtained other than college or graduate school degrees, including dates obtained:

5. OTHER APPLICANTS: (Cont'd)

c. Have you ever been denied an occupational or professional license, franchise or other similar credentials for which you applied? _____ (Yes or No)

If yes, please explain fully:

d. Do you have currently pending, any applications for an occupational or professional license, franchise, or other similar credentials. _____ (Yes or No)

If yes, please describe and indicate status of each such application:

e. Have you ever been suspended, reprimanded, censured, or otherwise disciplined or disqualified as a member of any profession, or as holder of any public office? _____ (Yes or No)

If yes, please describe each such action, the date(s) of occurrence, and the name and address of the authority imposing the action in question?

f. Are any charges or complaints currently pending against you regarding your conduct as a member of any profession, or as a holder of public office? _____ (Yes or No)

If yes, please indicate the nature of the charge or complaint and the name and address of the authority considering it:

g. Has your right to engage in any profession or occupation ever been disqualified, suspended, withdrawn, or terminated? _____ (Yes or No)

If yes, please explain fully:

5. OTHER APPLICANTS: (Cont'd)

6. FOR ALL APPLICANTS:

- a. Have you ever been convicted of or pled guilty to a criminal charge other than minor traffic violations? _____ (Yes or No)

If yes, please indicate nature of offense, date of conviction, criminal authority involved, and punishment assessed:

- b. Have your ever been a defendant in any civil proceedings, including bankruptcy proceedings, in which allegations of fraud, misrepresentation, embezzlement, misappropriation of funds, conversion, breach of fiduciary duty, forgery, or legal malpractice were against you? _____ (Yes or No)

If yes, please describe fully and indicate results of the civil proceeding(s) in question:

- c. Have you ever been adjudicated insane or legally incompetent by any court? _____ (Yes or No)

If so, please provide details:

- d. Were you ever suspended or expelled from any college, university, law school, or graduate school? _____ (Yes or No)

If yes, please explain fully:

e. Has any surety or any bond on which you were covered been required to pay any money on your behalf?
_____ (Yes or No)

6. FOR ALL APPLICANTS: (Cont'd)

If so, please describe circumstances:

f. Are there any unsatisfied judgments of continuing effect against you (other than alimony or child support)?
_____ (Yes or No)

If yes, please provide full details:

7. REFERENCES:

a. Please list below the names, addresses, and telephone numbers of at least three persons not related to you, who have known you for at least the last three years and who can attest to your character. (Names of officers, player representatives or staff members of the C.F.L.P.A., or Federation of Professional Athletes may not be used).

b. Please list below the names, addresses, and telephone numbers of at least two entities which can attest to your financial credit:

8. PROFESSIONAL SPORTS EXPERIENCE:

- a. Please list below the names of all C.F.L. players you are now representing or have represented in the past in individual contract negotiations with the C.F.L. clubs, indicating the dates of such representation and the C.F.L. club(s) involved:

- b. (Optional – applicant may refrain from answering if he or she desires).
Please 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 representation, the dates of representation, and the employers involved:

- c. Do you handle players' funds? _____ (Yes or No)
If yes, are you bonded? _____ (Yes or No)

If yes, you must be bonded in the amount equal to the funds you handle. Please provide below the details as to the amount of the bond and the name and address of the surety or Bonding company. As well please enclose a copy of same with your application. Failure to do so will result in your application being returned.

ACKNOWLEDGEMENT

I, _____ OF THE CITY OF _____
IN THE STATE/PROVINCE OF _____, MAKE OATH AND SAY:

1. THAT I have read the foregoing questions and have personally answered all of the same fully and honestly and the answers to said questions are true.

Signature of Applicant

SWORN BEFORE ME at the City of
_____, in the State/Province of
_____, this _____ Day
of _____, A.D. 20 _____

NOTARY PUBLIC