



Office of Compliance

Name, Image, and Likeness Activity Reporting Form

Describe the name, image, and likeness activity. Provide the terms of the agreement or transaction and 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 Phone	Contact email

If a confidentiality statement is required by an employer for any NIL activity, a copy of the non-disclosure agreement may be substituted for the top portion of this form; however signing the following attestation will still be necessary for submission.

I affirm, to the best of my knowledge:

- I have confirmed that this activity is consistent with state law/Executive Order NC-223
- I have confirmed that this activity does not conflict with the Barton College Honor Code or any institution policy, and the entities involved are not affiliated with drugs, alcohol, sports wagering, adult entertainment, or any NCAA banned substances.
- I have confirmed that this activity does not involve the use of institutional gear or uniforms, logos, insignias, or any other Barton specific property.
- 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.

- 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 or review. 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 Barton College, a substitute for pay for athletics performance or participation, or an otherwise illegitimate source of compensation for use of my name, image, and likeness. I further acknowledge that violating Executive Order NC-223 or any Barton College institutional policy is impermissible and may be grounds for penalty or violation.

Signature of Student-Athlete

Date

Signature of Parent or legal guardian (if minor)

Date

Printed Name

Date of Birth

Age

Home address

Sport(s)

Please complete this form and return to Britney Woodhull-Smith
bewoodhullsmith@barton.edu