



## APPLICATION FOR AUSTRALIAN RUGBY PLAYER AGENT ACCREDITATION

---

### SECTION 1: APPLICANT DETAILS

Full Name: \_\_\_\_\_

Business / Company Name & ABN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone – Work: \_\_\_\_\_

Telephone – Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

---

### SECTION 2: APPLICATION DECLARATION

I \_\_\_\_\_ (full name), hereby apply to the Board as administered by the Rugby Union Players' Association, NSW Department of Fair Trading Registration No. Y2283131 ("RUPA") for accreditation as a Player Agent pursuant to the Australian Rugby Player Agent Accreditation Scheme ("Scheme").

In advance of completing and signing this application, I have read the Australian Rugby Player Agent Accreditation Regulations ("Regulations") and Australian Rugby Player Agent Accreditation Code of Conduct ("Code of Conduct"), current copies of which have been provided to me along with this application form. I agree to be bound by and conform to those Regulations and the Code of Conduct.

I note that the answers to the following questions are to be considered as part of this application. I recognise that making false or misleading statements of a material nature in this application may lead to denial or revocation of my accreditation. If I do not provide this information, RUPA may not be able to assess my application effectively or at all. I agree:

1. That all statements, agreements and representations made in this application are made for the benefit of Australian rugby players, Rugby Australia Ltd ("RA"), NSW Waratahs Limited, Queensland Rugby Union Limited, Australian Capital Territory and Southern New South Wales Rugby Union Limited and Melbourne Rebels Rugby Union Pty Ltd and Sea of Blue Pty Ltd. (together the "State Unions") and The Rugby Union Players' Association ("RUPA");
2. That to properly assess my application it is necessary for RUPA to collect information in questions 4, 5 and 6 that may be sensitive information under the Privacy Act and I consent to that collection;
3. That the information herein will be held by the Australian Rugby Player Agent Accreditation Board ("Board") and will be used for the purposes of administering the Scheme and the Regulations. That information may be provided by the Board to the Australian Rugby Union Ltd, Australian rugby players and State Unions. At all other times and subject to relevant privacy legislation, the information will be kept securely and confidentially however Agents may gain access to their information by contacting the Chairman of the Board;
4. To pay the Board the application fee and upon declaration of eligibility by the Board, the annual accreditation fee assessed for Player Agents.

---

**SECTION 3: APPLICANT INFORMATION**

- PLEASE ANSWER ALL QUESTIONS THOROUGHLY
- For all "Yes" or "No" Answers, please write "Yes" or "No".
- Please attach additional sheets of paper if more space is required

**i. General**

- a. Have you ever been known by any other name or surname? \_\_\_\_\_ (Yes or No)  
If yes, state all names used and when used, including a maiden name or any other married names:

\_\_\_\_\_

\_\_\_\_\_

- b. Date of Birth: \_\_\_\_\_

**ii. Education**

- a. Colleges or Universities Attended:

College/University: \_\_\_\_\_ City & State \_\_\_\_\_

Dates of Attendance: From \_\_\_\_\_ To: \_\_\_\_\_

Level Achieved: \_\_\_\_\_ Date Awarded: \_\_\_\_\_

Details of Qualification: \_\_\_\_\_

College/University: \_\_\_\_\_ City & State \_\_\_\_\_

Dates of Attendance: From \_\_\_\_\_ To: \_\_\_\_\_

Level Achieved: \_\_\_\_\_ Date Awarded: \_\_\_\_\_

Details of Qualification: \_\_\_\_\_

College/University: \_\_\_\_\_ City & State \_\_\_\_\_

Dates of Attendance: From \_\_\_\_\_ To: \_\_\_\_\_

Level Achieved: \_\_\_\_\_ Date Awarded: \_\_\_\_\_

Details of Qualification: \_\_\_\_\_

- b. High School:

Dates of Attendance: From \_\_\_\_\_ To: \_\_\_\_\_

Level Achieved: \_\_\_\_\_

**iii. Current Occupation/Employment:**

- a. Employed by:

Name \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Nature and Term of Employment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b. Self Employed:

If self-employed, please state nature and location of business:

---

---

---

---

c. Please list below the names of employers, addresses, positions held, and dates of employment you had for the past five years:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

iv. **Other Details:**

a. Are you a current member of any business or professional organisation which directly relates to your occupation or profession?  
\_\_\_\_\_ (Yes or No)

If Yes, please list:

---

---

---

---

---

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

---

---

---

---

---

---

- c. Have you ever been suspended, reprimanded, censured, or otherwise disciplined, restricted or disqualified as a member of any profession, as an accredited or registered agent, or a holder of any public office? \_\_\_\_\_ (Yes or No)

If Yes, please explain fully:

---

---

---

---

- d. Are any charges or complaints currently pending against you regarding your conduct as a member of any profession, or as an accredited or registered agent, 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. Have you ever been a defendant in any civil proceedings in which a final judgement of fraud, embezzlement, misappropriation of funds, breach of fiduciary duty, forgery, professional negligence, legal malpractice or any other civil judgement of this nature was made against you? \_\_\_\_\_ (Yes or No)

If "Yes" please specify:

---

---

---

---

---

---

- f. Have you ever had legal proceedings brought against you by any player, players' association, professional sports club or governing body of a sport for any reason? \_\_\_\_\_ (Yes or No)

If "Yes", please specify the nature of the proceedings and the outcome:

---

---

---

---

- g. Have you ever been declared bankrupt or been an owner or part owner of a business which has declared bankruptcy in the past five (5) years? \_\_\_\_\_ (Yes or No)

If "Yes", provide full details, including whether the bankruptcy is now discharged:

---

---

---

---

h. Are there any circumstances that should be brought to the attention of the Board which may affect the Board's assessment of whether you are a fit and proper person to carry out the duties of an Accredited Agent? \_\_\_\_\_ (Yes or No). Please note

If "Yes", provide full details below:

---

---

---

---

**SECTION 4: CRIMINAL RECORD CHECK DISCLOSURE AND CONSENT**

It is a pre-condition of an application that you disclose your criminal record, other than traffic violations or any spent or lapsed convictions as those terms are defined in relevant Commonwealth, State or Territory legislation (see below), held by you and consent to RUPA conducting a criminal record check. As part of the application process, RUPA undertakes criminal record checks to enable it to determine whether applicants are likely to satisfy the inherent requirements of being a player agent. Integrity and honesty are essential requirements for being accredited as a player agent.

Your criminal record information will be considered in assessing your application. Your application may be refused if:

- It is determined your criminal record affects your ability to perform the requirements of player agent; or
- You provide false or misleading information about your criminal record.

If you choose not to provide criminal record information or choose not to consent to a criminal record check, your application will not be considered by RUPA.

As noted above, you are not required to disclose spent or lapsed convictions under relevant law. We note that as at the date this form was drafted:

- Under Commonwealth legislation, a spent conviction is an adult conviction more than 10 years old or a juvenile conviction more than 5 years old, provided there have been no further convictions and the maximum penalty for the original offence did not exceed 30 months’ imprisonment;
- Under New South Wales legislation, convictions are spent after 10 years, provided the conviction did not involve 6 months’ imprisonment or was for sexual or violent offence;
- Under Queensland legislation, a spent conviction is an adult conviction more than 10 years old or a juvenile conviction more than 5 years old;
- Under Western Australian legislation, a spent conviction is an adult conviction more than 10 years old or a juvenile conviction more than 5 years old, provided there have been no further convictions and the maximum penalty for the original offence did not exceed 30 months’ imprisonment; and
- Under Australian Capital Territory legislation, a spent conviction is an adult conviction more than 10 years old or a juvenile conviction more than 5 years old, provided the conviction did not involve 6 months’ imprisonment or was for sexual offence.

Any information which you provide to us on this form will be disclosed to law enforcement authorities only for the purposes of obtaining the criminal record check.

We will retain any criminal record information for as long as required or authorised by law. We will take reasonable steps to protect that information from unauthorised access, modification, use and disclosure. You may request access to the criminal record information which we hold about you by contacting RUPA on (02) 9519 8211.

**Please complete:**

Have you ever been convicted of or pleaded guilty to a criminal offence, other than traffic violations, spent or lapsed convictions (\*as described above)? \_\_\_\_\_ (Yes or No)

If yes, please indicate nature of offence, date or conviction, criminal authority involved, and penalty imposed if any:

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**SECTION 5: FURTHER APPLICANT INFORMATION**

**i. References**

Please provide two (2) written references from persons not related to you by blood or marriage (including de-facto relationship), who have known you for at least the last three (3) years, the nature, length and capacity of your relationship and who can attest to your good fame and character. (Names of Players or staff members of RUPA, ARU or State Unions may not be used):

**ii. Professional Sports Experience**

Please list below (or attach a list which includes) the names of every Rugby Union Player you currently represent in individual contract negotiations with the ARU, State Unions or Clubs. Please also list any other athlete you represent in sports other than Rugby Union:

Rugby: \_\_\_\_\_  
\_\_\_\_\_

Other Sports: \_\_\_\_\_  
\_\_\_\_\_

**iii. Management Personnel**

List the names of any coaches, general managers or other management officials employed by any Rugby Body you represent or have represented in the past regarding employment with their respective Clubs/ States or Country.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**iv. Board, Coaching & Management Commitments**

Please list any board, coaching, management, S&C or other commitments you have paid, volunteered or otherwise at any level.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 6: YOUR PLAYER AGENT SERVICES**

**i. Business Services**

a. What services do you or your firm provide or intend to provide to the Rugby Players?

- |   |   |
|---|---|
| <input type="checkbox"/> Contract Negotiations  | <input type="checkbox"/> Estate Planning                              |
| <input type="checkbox"/> Tax Planning           | <input type="checkbox"/> Financial Planning                           |
| <input type="checkbox"/> Investment Counselling | <input type="checkbox"/> Appearances/Endorsements/Marketing/Promotion |

Other Services (Explain)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. What qualifications and licences do you hold in relation to the Services you have specified above?

---

---

---

---

---

c. Do you manage, invest or in any other manner handle funds for rugby players? \_\_\_\_\_ (Yes or No)

d. Do you have any agreement, understanding or relationship of any kind with any individual, firm or organisation which solicits or recommends players to use your service and pursuant to which you provide such individual, firm or organisation any compensation or other consideration? \_\_\_\_\_ (Yes or No)

If so, explain fully, including the name and address of each such person, firm or organisation:

---

---

---

---

f. Does the company you are with or a company you are a director of have any understanding, contract or arrangement for commercial gain with the State Unions or the ARU? \_\_\_\_\_ (Yes or No)

If so, please explain:

---

---

---

**ii. Professional Indemnity Insurance**

You must have professional indemnity insurance providing cover in respect of your work as a player agent.

Please specify the insurer, the terms and value of the insurance and attach a Certificate of Currency:

---

---

---

---



**SECTION 7: ACKNOWLEDGEMENT**

I \_\_\_\_\_ (full name), have read the foregoing questions, and have personally answered all questions fully and honestly. All answers are true and correct to my knowledge. I consent to representatives of RUPA obtaining a criminal record check in my name. Further, I have been provided copies of the Australian Rugby Player Agent Accreditation Scheme Regulations, the Australian Rugby Player Agent Accreditation Scheme Code of Conduct and the Australian Rugby Standard Player Agent Agreement and agree to be bound by all such documents in their entirety.

Executed by Applicant:

\_\_\_\_\_  
(Signature) (Date) \_\_\_\_\_

In the presence of Witness:

\_\_\_\_\_  
(Name) (Signature) \_\_\_\_\_

---

To lodge this application or for any further information or privacy law requests please contact:

**Toby Duncan**  
**General Manager, Player Services & Operations**  
The Rugby Union Players' Association  
Level 1 / 10 Mallett Street,  
Camperdown  
NSW 2050  
T: +612 9519 8211 ext. 104  
F: +612 9565 4953  
E: [tduncan@rupa.com.au](mailto:tduncan@rupa.com.au)