



Personal Branding Activities (PBA) Disclosure Form

Student Name _____

Contact Email _____ Contact Phone _____

School _____ Graduation Year _____

Source of PBA Compensation _____

Agent (if applicable) _____

Date PBA Signed _____

Please include the following information related to the contract and financial terms: payment amount, product(s) received, term of the agreement, activities to be performed, and any additional relevant details.

I have read and understand the MHSAA PBA regulations. I will not use the name, logos, mascots, trademarks, or other obvious identifiers of the MHSAA or any MHSAA member school or use the facility or property of any member school. PBA compensation is not contingent on specific athletic performance and shall not be provided as an inducement to attend or remain at a particular school. PBA compensation shall not be provided, facilitated, or arranged, directly or indirectly, by an MHSAA member school or Associated Entity or Individual.

Student Signature _____ Date _____

Parent Signature (if student under 18) _____ Date _____

**Within 7 days of signing the contract, email this completed form to
the MHSAA (PBA@mhsaa.com).**