

**Oregon State Athletic Commission**  
**3400 State St.; Suite G-750**  
**Salem, OR 97301**

**Mixed Martial Arts**  
**Promoter Event Application**

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To Mixed Martial Arts Promoters,  
So that the Commission may adequately plan for the regulation of proposed MMA events, please provide the following information to request an event date. Please provide this application within a minimum of 30 days of your scheduled event. Promoters may be responsible for the scheduled fees of officials that are assigned if the event is subsequently cancelled. Events may not be authorized if adequate officials or resources are not available.

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Promoter: \_\_\_\_\_ Proposed Event Date: \_\_\_\_\_

Location/Venue: \_\_\_\_\_ Max Occupancy: \_\_\_\_\_

Estimated Gross Receipts of a Sellout: \_\_\_\_\_ 6% Tax Due Date (within 72 hours): \_\_\_\_\_

Maximum Number of Scheduled Amateur Bouts: \_\_\_\_\_ Maximum Number of Scheduled Pro Bouts: \_\_\_\_\_

*Note: Proposed bouts must be submitted within 48 hours for review and approval, or they may not be allowed. Professional, Main Event bouts must be submitted for approval within 5 days of the event. Professional fighter contracts must be submitted for review and approval within 24 hours of the event. Proof of insurance must be provided prior to the event. Registration of proposed event on Association of Boxing Commissions website is required for approval of proposed event. ABC Website: [www.mixedmartialarts.com](http://www.mixedmartialarts.com)*

Proposed date/location/time of weigh-in: \_\_\_\_\_

Will you use a cage or a ring? \_\_\_\_\_ Will there be television coverage? \_\_\_\_\_

If so, will the weigh in be televised? \_\_\_\_\_

**Scheduled Bouts\***

	VS	
	VS	
	VS	
	VS	
	VS	
	VS	
	VS	
	VS	
	VS	

\*Attach additional scheduled bouts, if necessary. Please indicate Professional or Amateur. Please indicate if a bout is to be considered a title bout.

**I declare under penalty of perjury under the laws of the State of Oregon that I am named as an officer of the above named promotion and as such am authorized to submit this application.**

**Promoter:** \_\_\_\_\_  
Print Name Signed Date