



Georgia Athletic and Entertainment Commission
Room 802 West Tower
#2 Martin Luther King Jr. Drive
Atlanta GA 30334
Phone 470-312-2702
Fax 470-312-2612

Application for Event Permit

Boxing Fee: \$60

MMA Fee: \$260

THIS FORM MUST BE FILED WITH THE GEORGIA ATHLETIC AND ENTERTAINMENT COMMISSION **30 DAYS** PRIOR TO THE DATE OF THE EVENT

Name of Promoter- if you are not currently licensed as a promoter in Georgia then a Promoter's application packet must accompany this application

NAME OF EVENT: _____

Date of Event: _____ Time of Event: _____ City/State _____

Type of Event: ___ Boxing ___ Professional MMA ___ Amateur MMA ___ Kickboxing

Date of Weigh in: _____ Time of Weigh in: _____ Address: _____

To be completed by the Promoter of the Event

Matchmaker (as licensed) _____

Name of Sanctioning Organization for event, if applicable: _____

Proposed location for Program of Matches:

Name of Facility: _____

Address of Facility: _____
Street State Zip

Facility Telephone: _____

Facility Contact Person: _____ Phone: _____ Email: _____

Ambulance Service: _____

Event Physician(s): _____

Commission Hotel (if needed): _____

Will any match in this event be broadcast? Yes ___ No ___

Will the event be broadcast by pay per view? Yes ___ No ___

Anticipated Revenue Source (ticket sales, broadcast, etc.): _____

Is there any person or business entity, other than the licensed promoter of record that will receive revenues or other compensation from the sale of tickets or broadcast rights in conjunction with the promotion of the event of matches? (Please include copies of contractual agreements) ___ YES ___ NO

If YES please provide the following information for each person or business entity in the space provided below or you may attach an additional sheet if necessary.

Name _____ Telephone Number _____

I attest that the information provided herein, in this application for permit, is true, correct, and accurate to the best of my knowledge. I understand that I am responsible for the payment of all taxes and fees due the commission and for making such payments within the prescribed time frames.

Signature

Date