



THE COMMONWEALTH OF MASSACHUSETTS

DIVISION OF PROFESSIONAL LICENSURE

STATE ATHLETIC COMMISSION

1 FEDERAL STREET, SUITE 0600

BOSTON, MA 02110-2012

Application Instructions for Promoter's License

To be licensed as a promoter, you must submit the following to this office.

- Completed Application Form
- \$150 Non-refundable Application Fee made payable to the Commonwealth of Massachusetts
- Non-Massachusetts Residents Only: One Passport Photo (2" x 2") of Applicant
- Copy of a Government Issued Photo Identification (e.g. Driver's License/Passport)
- Copy of bond in the penal sum of \$50,000 with sureties running to the Commission and providing for a forfeiture to the Commonwealth, recoverable at the suit if the attorney general, of such sum not exceeding \$10,000 for each case of non-compliance in accordance with MGL c. 147 §34.
- Financial Statement with Schedules and Account Statements from Banks
- Articles of Incorporation or copy of partnership Agreement, if applicable
- Curriculum Vitae



EXPERIENCE

ARE YOU CURRENTLY LICENSED/CERTIFIED BY ANY OTHER ATHLETIC COMMISSION? _____

IF YES, WHERE? _____

WHAT LICENSE(S)/CERTIFICATION(S) DO YOU CURRENTLY HOLD IN ANY OTHER STATE/JURISDICTION?

HAVE YOU EVER BEEN SUSPENDED/REVOKED/DISCIPLINED BY ANY OTHER ATHLETIC COMMISSION? _____

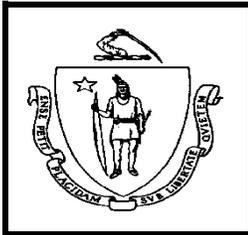
IF YES, WHERE? _____

PLEASE EXPLAIN (ATTACH SEPARATE SHEET IF NECESSARY). _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME BY ANY STATE OR JURISDICTION? _____

IF YES, PLEASE EXPLAIN (ATTACH SEPARATE SHEET IF NECESSARY). _____

OUTLINE YOUR BACKGROUND AND EXPERIENCE IN UNARMED COMBAT AND EXPLAIN WHY YOU BELIEVE YOU ARE QUALIFIED TO HOLD A PROMOTER'S LICENSE. (ATTACH SEPARATE SHEET IF NECESSARY).



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PROMOTER'S STATEMENT OF FINANCIAL INFORMATION

ASSETS

Balance in bank accounts (attach schedule A) \$ _____

Balance of stocks/bonds (attach schedule B) \$ _____

Real estate (attach schedule C) \$ _____

Other assets (attach schedule D) \$ _____

TOTAL ASSETS \$ _____

LIABILITIES

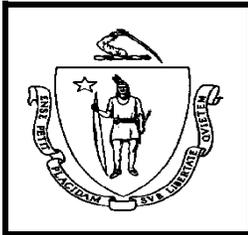
Total amount of indebtedness (attach schedule E) \$ _____

TOTAL LIABILITIES \$ _____

I hereby attest, under the pains and penalties of perjury, that the information provided above is true and accurate to the best of my knowledge.

Promoter Signature

Date



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SCHEDULE A – Bank Account Information as of Date Financial Statement was Signed Attach Most Recent Bank Statements

Name & Address of Institution	Name(s) on Account	Date Opened	Type of Account	Balance





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SCHEDULE B – Balance of Stocks/Bonds as of Date Financial Statement was Signed Attach Most Recent Statements

Issuer	Name(s) in which Stocks/Bonds held	Date Purchased	Type	Market Value





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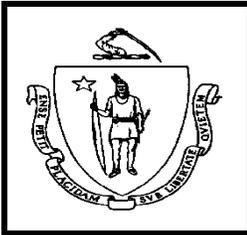
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SCHEDULE C – Value of Real Estate as of Date Financial Statement was Signed

Address of Property	Name(s) of Owner(s)	Date Purchased	Type	Market Value





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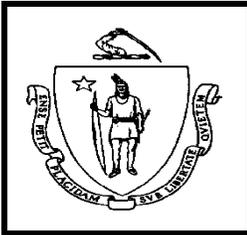
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SCHEDULE D – Other Assets as of Date Financial Statement was Signed Attach Most Recent Statements

Type of Asset	Name(s) on Account	Date of Purchase	Market Value



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SCHEDULE E – Liabilities as of Date Financial Statement was Signed

Name & Address of Creditor _____

Nature of Debt _____

Date Incurred _____

Unpaid Balance _____ Monthly payment _____

Name & Address of Creditor _____

Nature of Debt _____

Date Incurred _____

Unpaid Balance _____ Monthly payment _____

Name & Address of Creditor _____

Nature of Debt _____

Date Incurred _____

Unpaid Balance _____ Monthly payment _____

Name & Address of Creditor _____

Nature of Debt _____

Date Incurred _____

Unpaid Balance _____ Monthly payment _____