MANITOBA COMBATIVE SPORTS COMMISSION

427-145 Pacific Ave Winnipeg, MB R3B 2Z6 Tel. (431) 877-MCSC (6272) email:info@mbcombativesports.com



EVENT PERMIT APPLICATION

License Application Form can be sent to: <u>info@mbcombativesports.com</u> License Application fee can be paid by e-transfer to: <u>info@mbcombativesports.com</u>

I,		hereby apply for an event
permit to hold a combative sp		
Promoter Contact Informa	tion:	
1. Full legal name or Corpora	ution:	
2 Mailing Address:		
		Postal Code:
		Cell
4. E-Mail address:		Com
Event Information:		
1. Type of event An	nateur Professional Mi	xed
2. Type of Contests	Boxing (Pro only) MMA	Kickboxing Muay Thai
3 Matchmaker:		
4. Name of proposed ev	rent	
5. Date of proposed con	test: Si	tart Time:
6. Venue name/ location	n/contact:	
7. Seating capacity:		
8. Total number of cont	ests:	
9. Location of weigh-in	: Weigh-in t	time:
10. The event to be tape	d or recorded on or behalf of the	e promoter (Yes/No):
Attach the following:		
 Security in the form of Manitoba Combative S regulation. List of proposed match Amount to be paid to e Corporations need to p 	ports Commission in the amount de les including contestants names, rec ach of the contestants. rovide documents identifying the lis who has authority to speak on beha	ollars) bond or letter of credit payable to the etermined by the Commission as set out in the cords and number of rounds of each contest. st of the organizations directors so that the alf of the corporation and who to hold
(Sign Legal Name)		

Applicant Signature:

Date: