

**Boxing, Martial Arts, and Professional Wrestling Program
 PROMOTER LICENSE APPLICATION
 Fee \$500.00**

Promoters must be licensed in Virginia prior to submitting an application for an event.
 Please allow sufficient time for processing of this application before submitting an ***Event License Application***.

**A check or money order payable to the TREASURER OF VIRGINIA,
 or a completed [credit card insert](#) must be mailed with your application package.
 APPLICATION FEES ARE NOT REFUNDABLE.**

Select the **one** method and **one** specific license type you are requesting:

X	License Type:	Trans
<input type="checkbox"/>	4106 - Initial/First Virginia Wrestling Promoter License	1020
<input type="checkbox"/>	4106 - Renewal prior to Wrestling Promoter License Expiration	2020
<input type="checkbox"/>	4106 - Re-Issue of Expired Wrestling Promoter License	1020
<input type="checkbox"/>	4110 - Initial/First Virginia Boxing/Martial Artist Promoter License	1020
<input type="checkbox"/>	4110 - Renewal prior to Boxing/Martial Artist Promoter License Expiration	2020
<input type="checkbox"/>	4110 - Re-Issue of Expired Boxing/Martial Artist Promoter License	1020

1. Has your business ever held a **Promoter License** issued by the Virginia Department of Professional and Occupational Regulation?

No

Yes If yes, provide your Virginia License number below:

Virginia License Number

4	1								
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Expiration Date _____

2. Business Entity/Sole Proprietor Name _____
 > A sole proprietor should enter his/her full legal name and the company name should be entered below as the assumed/fictitious name. All names must be the same as displayed on government issued ID or organization/business documents.

3. Assumed or Fictitious Name [^] _____
[^] If an **assumed/fictitious name** is to be used, a copy of the certificate filed with the Virginia State Corporation Commission (SCC) pursuant to [§59.1-69](#) of the *Code of Virginia* must be attached to this application.

4. A. Type of business entity (select only **one**):
 Sole Proprietorship General Partnership Solely Owned LLC Corporation
 Limited Partnership Limited Liability Company Other, please specify: _____
Other: Association, Business Trust, Government Agency, Joint Venture, Limited Liability Partnership, Non Profit, Professional Corporation, or Professional Limited Liability Company.

B. State Corporation Commission (SCC) Number: _____ (If applicable)
 > All businesses in Virginia must be registered with the SCC (including all out-of-state businesses). Firms/Businesses shall be organized as a business entity under the laws of the Commonwealth of Virginia or otherwise authorized to transact business in Virginia. No **person, partnership, limited liability company or corporation** shall conduct or transact business in this Commonwealth under any assumed or fictitious name unless register with the Virginia SCC.
 For additional information, contact the SCC at www.scc.virginia.gov or by phone at (804) 371-9733.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
					41	

13. Has any (including Virginia) local, state or national regulatory body in any jurisdiction ever taken **disciplinary action** against you, your business or any member of responsible management in connection with participation in or promotion of professional athletic contests or activities including, but not limited to, monetary penalty, fine, suspension, revocation, or surrender of a license?
- No
- Yes If yes, complete the [Disciplinary Action Reporting Form](#).
14. A. Has this business or any member of Responsible Management ever been found **guilty** by the department or a court of competent jurisdiction **of any material misrepresentation** while engaged in boxing, martial arts, wrestling, or other athletic activities?
- No
- Yes If yes, complete the [Criminal Conviction Reporting Form](#).
- B. Has this business or any member of Responsible Management ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**? *Any plea of nolo contendere shall be considered a conviction.*
- No
- Yes If yes, complete the [Criminal Conviction Reporting Form](#).
- C. Has this business or any member of Responsible Management ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor**? *Any plea of nolo contendere shall be considered a conviction.*
- No
- Yes If yes, complete the [Criminal Conviction Reporting Form](#).
15. No license to act as a promoter shall be granted unless the applicant executes and files with the Department a bond as stated in the *Code of Virginia*; §[54.1-829](#). Do you have a bond executed by a surety authorized to do business in the Commonwealth of Virginia?
- No
- Yes If yes, provide a copy of the bond.

NOTE: Bond amount must be equal to or greater than the sum of (i) total gate fees and (ii) total amount due to all boxers, martial artist, and wrestlers for their performance in an event, but shall not exceed \$100,000. If the bond submitted with this application is not sufficient to cover an event, a supplemental or modified bond may be required prior to approval of the event.

16. By signing this application, I certify the following statements:

- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
- I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
- I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
- I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 8.1 of the *Code of Virginia* and the *Professional Boxing, Wrestling and Martial Arts Regulations*.
- I understand that I am not entitled to compensation in connection with a boxing or martial arts match, including gate fees, until I provide the department with a copy of any agreement in writing to which I and any boxer or martial artist participating in the match are parties; a statement made under penalty of perjury that there are no other agreements; a statement of fees, charges and expenses that will be assessed by or through me on the boxer or martial artist, including any portion of the boxer's or martial artist's purse that I receive and training expenses; all payments, gifts or benefits I am providing to any sanctioning organization affiliated with the event; and any reduction in the boxer's or martial artist's purse contract to a previous agreement between myself and the boxer or martial artist. Further, I understand that I am not entitled to compensation in connection with a boxing or martial artist match until I provide the boxer or martial artist I promote with the amounts of any compensation or consideration that I have contracted to receive from such match; all fees, charges and expenses that will be assessed by or through me on the boxer or martial artist pertaining to the event, including any portion of the boxer's or martial artist purse that I will receive and training expenses; and any reduction in a boxer's or martial artist purse contract to a previous agreement between myself and the boxer or martial artist.

Responsible Management Signatures (include the signatures of all the individuals listed in #11.)

Print Name _____	Title _____
Signature _____	Date _____
Print Name _____	Title _____
Signature _____	Date _____
Print Name _____	Title _____
Signature _____	Date _____
Print Name _____	Title _____
Signature _____	Date _____
Print Name _____	Title _____
Signature _____	Date _____