



NMRLD

NEW MEXICO
REGULATION &
LICENSING DEPARTMENT

STATE OF NEW MEXICO
MICHELLE LUJAN GRISHAM, GOVERNOR
Clay Bailey, Superintendent

APPLICATION FOR PROMOTER LICENSE

This application can be filled in using a computer. Click and type in the gray boxes and tab to move through the application. Otherwise, print legibly.

APPLICATION CHECKLIST

- ☐ 1. Completed license application
- ☐ 2. \$10,000 Surety Bond on Commission Bond Form
- ☐ 3. Include one 2x2 passport type photograph
- ☐ 4. Check for license fees: **\$250 In-state - \$500 Out-of-state**



PROMOTER APPLICATION

FEES – Payable by check or money order.

Fee: \$250 (Promoter); \$500 (Foreign Promoter) - payable by check or money order

Date:		License requested:	
Name:			
Address:			
City:		State:	Zip:
Home phone:		Business phone:	
Cell phone:		E-mail:	
Birth date:		Social Security Number/ITIN:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any financial interest in any entity conducting boxing or wrestling in this or any other State? If yes, explain:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had a license revoked or suspended by an Athletic Commission in any jurisdiction? If yes, explain:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? If yes, provide date of conviction, name of offense, and jurisdiction for each felony:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you read the New Mexico Athletic Competition Act and the Rules adopted by the New Mexico Athletic Commission, and have a full understanding of these regulations?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently more than thirty days in arrears in payment of amounts required to be paid pursuant to an outstanding judgement and order for child support in New Mexico or any other state?		
List three (3) references:			
Name:	Address:		Phone:
Name:	Address:		Phone:
Name:	Address:		Phone:
Attach recent passport type photo:			

I, _____, hereby affirm that the statements made in this application are true and correct to the best of my knowledge and do so under the penalties of perjury.

Signature

Date



EVENT PERMIT

FEES – payable by check or money order. *Please do not send cash.*

☐ **Boxing** ☐ **Kick Boxing** ☐ **Mixed Martial Arts** ☐ **Wrestling**
☐ **Professional** ☐ **Amateur** ☐ **Pro-Am**

FRANCHISE HOLDER/PROMOTER INFORMATION

First name:	Middle initial:	Last name:	
Street address:			
City:	State:	Zip:	Phone number:
Promoters name:			License number:

EVENT INFORMATION

Date of event:	Location:	Start time:
Date of weigh-ins:	Location:	Start time:
Name of main event participants:		
Number of bouts:		
Name of security company:	Name of EMT company:	
Name of event coordinator:	Name of ringside physician:	
Name of drug testing company:	Phone number:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Liquor sales requested? If yes, check all that apply: <input type="checkbox"/> Beer <input type="checkbox"/> Wine <input type="checkbox"/> Spirits	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have spectator liability and property damage insurance?	
Agency name:	Phone number:	
Performance bond agency:	Phone number:	
Contestant's injury insurance agent:	Phone number:	

Signature and title

Date

****ALL LICENSING INFORMATION IS PUBLIC INFORMATION****

For office use only. Date approved:

NM Athletic Commission Signature:

PROFESSIONAL EVENT FINANCIAL REPORT

This report and payment in full is due in the office of the New Mexico Athletic Commission within 72 hours after completion of the professional event.

Report date:	
Event date:	Location:
Promoter:	License #:

TOTAL TICKETS SOLD OR ISSUED

Type and number printed	Face value	Number sold	Complimentary issued	Gross value
				\$
				\$
				\$
				\$
Total gross value:				\$

SALE, LEASE OR OTHER EXPLOITATION OF BROADCASTING RIGHTS

Gross amount received by the Promoter for the sale, lease or other exploitation of broadcasting television or motion picture rights without any deductions:

\$

OTHER CONSIDERATION RECEIVED

Any sum received by the Promoter as consideration for holding a professional contest at a particular location:

\$

COMPUTATION OF REGULATORY FEES

1. Total gross value on tickets net of gross receipts taxes

\$

2. Sale, lease, or other exploitation of broadcasting rights

\$

3. Consideration for holding a professional contest at a particular location

\$

Total gross receipts (add 1, 2, and 3 above)

\$

Regulatory fees due (4% of total gross receipts)

\$

I, _____, hereby affirm, under the penalties of perjury, that the information contained herein is true and correct to the best of my knowledge.

Submitted by:

Authorized Signature

Date



PROMOTER'S PAYMENTS

Promoters shall, at the site of the event, arrange for payment of various individuals connected with the event. These include, but are not limited to the following:

- Regulatory Fee – New Mexico Athletic Commission
- Gross Receipts Taxes – State of New Mexico
- Supervisory
- Contestants
- Officials
- Arena
- Security
- Ring Physician
- Ushers
- Ring Rental
- Licenses of Participants
- Others considered by Commission as pertaining to event

PAYMENT OF OFFICIALS

The Commission shall collect from the promoter all official's fees. Championship fights will be based on the sanctioning body's (IBF, NABF, USBA, WBC, etc.) regulations. The payment schedule is included in this packet.

Promoter's Signature

Date

LICENSING FEE SCHEDULE

Announcers	\$25	Booking agent	\$35
Boxers - professional	\$25	Foreign co-promoters	\$500
Judges	\$25	Judges – trainees	\$10
Managers	\$25	Matchmaker	\$35
Promoters	\$250	Referees	\$25
Timekeeper	\$25	Trainers	\$25
Professional Wrestler	\$35	Seconds	\$25



OFFICIALS FEE SCHEDULE

FEE WITHIN 148 MILES ROUND TRIP

REFEREE	\$200.00
JUDGE	\$150.00
TIMEKEEPER	\$125.00
DEPUTY INSPECTOR	\$125.00
DOCTOR	\$450.00
EVENT COORDINATOR	\$300.00

FEE FOR 149 MILES OR MORE ROUND TRIP

REFEREE	\$360.00
JUDGE	\$310.00
TIMEKEEPER	\$285.00
DEPUTY INSPECTOR	\$285.00
DOCTOR	\$610.00
EVENT COORDINATOR	\$460.00

****Standard Officials Schedule Includes:**

4 Judges

3 Referees

1 Timekeeper

8 Deputy Inspectors (minimum)

****The Number of working officials is subject to change depending on the venue and event size.**

The event coordinator/chief deputy inspector will receive all checks from the promoter no later than the day of the weigh-ins and will distribute to officials prior to the first bell.





EVENT REQUIREMENT CHECKLIST

- ☐ 1. Contact a Drug Testing Company
 - PED testing – for 1/3 of all professional bouts
 - 10-panel drug test - for 1/3 of the card, main events and title fights
 - Alcohol testing – for ALL combatants
- ☐ 2. All licensing, contracts, and medicals at least 96 hours prior to event
(Medicals: blood work within 6 months of event for all combatants, eye exams within 1 year of event for Professional combatants)
- ☐ 3. Copy of roster with names of seconds for combatants
- ☐ 4. Provide number of dressing rooms for combatants
- ☐ 5. List of media and/or promotion personnel for technical zone
- ☐ 6. Seating accommodation for Commission and Officials in technical zone
***Please note – a walk through will be conducted after weigh-ins (if applicable), or upon arrival of event coordinator on day/night of event.*
- ☐ 7. For the event please provide:
 - Towels, buckets, water, corners stools
 - 20 copies of fight card

Application for NM license

<https://www.rld.nm.gov/wp-content/uploads/2025/05/Licensee-Application.pdf>

**Reminders*

- No alcohol allowed in technical zone
- Submit ALL fight card changes to NMAC for Commission approval

