



APPLICATION CHECKLIST

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.

| | 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: ☐ Yes ☐ No Do you have any financial interest in any entity conducting boxing or wrestling in this or any other State? If yes, explain: ☐ Yes ☐ No Have you ever had a license revoked or suspended by an Athletic Commission in any jurisdiction? If yes, explain: Have you ever been convicted of a felony? If yes, provide date of conviction, name of offense, and ☐ Yes ☐ jurisdiction for each felony: ☐ Yes ☐ 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? Are you currently more than thirty days in arrears in payment of amounts required to be paid pursuant ☐ Yes ☐ No to an outstanding judgement and order for child support in New Mexico or any other state? List three (3) references: Name: Address: Phone: Address: Phone: Name: Name: Address: Phone: Attach recent passport type photo: , 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.



Date

Signature



EVENT PERMIT

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

| □Boxing □Kic | k Boxing | □Mixed | Martial | Arts | $\Box \mathbf{v}$ | Vrestling |
|--|--|-----------------------------|----------------------|----------------|-------------------|-------------|
| □Profession | al 🗆 | Amateur | | Pro-A | m | |
| FRANCHISE HOLDER/PRO | OMOTER I | NFORMATIO | N | | | |
| First name: | | Middle initial: | | Last r | name: | |
| Street address: | 1 | | | l | | |
| City: | | State: | ate: Zip: | | Phone number: | |
| Promoters name: | <u>l</u> | | | License | number: | |
| | | | | | | |
| EVENT INFORMATION Date of event: | Location: | | | | | Start time: |
| Date of weigh-ins: | Location: | Location: | | | | Start time: |
| Name of main event participan | nts: | | | | | |
| 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: | | | ber: | |
| ☐ Yes ☐ No ☐ Liquor sales requested? If yes, check all that apply: ☐ Beer ☐ Wine ☐ Spirits | | | | ☐Wine ☐Spirits | | |
| □Yes □No Do yo | □No Do you have spectator liability and property damage insurance? | | | | | |
| Agency name: | | Phone number: | | | | |
| Performance bond agency: | | | | Phone number: | | |
| Contestant's injury insurance | | | Phone number: | | | |
| | | | | - I | | |
| Signature and title | | | | Г | ate | |

ALL LICENSING INFORMATION IS PUBLIC INFORMATION

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.

| | hours afte | er completion o | of the pro | fessional event. | | |
|--|--------------------------|-----------------|------------|---|----------------------|--|
| Report date: | | | | | | |
| Event date: | | | Location: | | | |
| Promoter: | | | License #: | | | |
| TOTAL TIC | KETS SOLD OR ISS | HED | I | | | |
| Type and number printed | | Number so | ld | Complimentary issued | Gross value | |
| pcu | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | | \$ | |
| | | | | Total gross value: | \$ | |
| | | | | | * | |
| | SE OR OTHER EXPL | | | | S | |
| | t received by the Promo | | | • | \$ | |
| | television or motion pic | | nout any | deductions: | | |
| | eived by the Promoter as | | for holdi | ng a professional | \$ | |
| contest at a pa | articular location: | | | | | |
| | TION OF REGULATO | | | | | |
| 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 gro | ss receip | es (add 1, 2, and 3 above | e) \$ | |
| | | Regulatory fe | es due (4 | % of total gross receipt | s) \$ | |
| , hat the inform | ation contained herein i | s true and corr | | eby affirm, under the pe best of my knowledge. | enalties of perjury, | |
| 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 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.



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



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 |
| All licensing, contracts, and medicals at least 96 hours prior to event (Medicals: blood work within 6 months of event for all combatants, dilated eye exams within 1 year of event for Professional combatants) **Combatant physicals will be completed by ringside physician on the day of the event. |
| 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: |
| Ice, towels, buckets, water, corners stools |
| (Gallon sized zip lock bags – in the case combatant/corner doesn't have icepack) |
| 20 copies of fight card |

NM Licensee Application

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

