



OKLAHOMA
State Athletic Commission

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Oklahoma City, OK 73102
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Fax (405) 900-8383
Email: Boxing@health.ok.gov
www.ok.gov/osac/

APPLICATION FOR EVENT PERMIT

Wrestling

PERMIT FEE \$50.00

Promoter Name: _____

Phone Number: _____ Email: _____

Date of Event: ___ / ___ / ___ Location of Event: _____

Name of Event: _____ Door Open @ _____ First Fight @ _____

Address of Event: _____ City: _____ Zip code: _____

Approval is granted for the above event upon signature of Commission.

Oklahoma State Athletic Commission

Inspectors Assigned: _____

Permit Number: _____