



OKLAHOMA PROFESSIONAL BOXING COMMISSION

1000 NE 10th St., Rm. 1213
Oklahoma City, OK 73117-1299
Tel. (405) 271-5243
Fax (405) 271-1695
Email: Boxing@health.state.ok.us
<http://www.health.state.ok.us/box/>

APPLICATION FOR EVENT PERMIT

ELIMINATION TOURNAMENT

PERMIT FEE \$50.00

Promoter Name: _____

Address: _____ City: _____ State: ____ Zip: Code: _____

Date of Event: ____/____/____ Location of Event: _____

Name of Event: _____ Time of Event: _____

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

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

Oklahoma Professional Boxing Commission

Inspectors Assigned: _____

Permit Number: _____