



GENERIC TO ALL APPLICANTS:

Promoters, who wish to hold a combat sport contest in Western Australia, must hold a permit issued by the Combat Sports Commission. Applicants for a permit must:

- ☐ Complete and lodge Part 2 of the Promotion Permit Application form not less than 21 days prior to the event.
- ☐ If applicable, inform the Commission of any international and/or national title contests on the promotion,
- ☐ Ensure Contestants and Participants intending to participate in the promotion have a current registration with an approved authority or register with the Commission, and
- ☐ Contestant and Trainer registrations and renewals must be submitted at least 5 days prior to a promotion if the applicant wishes to be considered for that promotion.

**Under s.53 of the Combat Sports Act it is an offence to provide false or misleading information.
Maximum penalty \$12,000.**

TYPES OF CONTESTS: Details must be provided for all contests:

		SANCTIONING BODY (Rules to be used for contests)	
Type	No. of Contests	CSC	Other – specify
Boxing			
Kickboxing / K-1			
Muay Thai			
Mixed Martial Arts			
Other (Please specify)			

PROPOSED OFFICIALS:

Minimum required: 2 Referees, 3 Judges and 1 timekeeper – NB - 1 Referee is required to sign gloves and wraps

NAME	CONTACT NUMBER	REGISTRATION	DATE CONTACTED
1.		R / J / T	/ /
2.		R / J / T	/ /
3.		R / J / T	/ /
4.		R / J / T	/ /
5.		R / J / T	/ /
6.		R / J / T	/ /
7.		R / J / T	/ /
8.		R / J / T	/ /

JUNIOR v SENIOR CONTESTS: Please detail any junior versus senior contests you are proposing:

CONTESTANT 1	AGE (Yr & Mth)	CONTESTANT 2	AGE (Yr & Mth)

ARE THERE ANY CONTESTANTS WITH SENSORY IMPAIRMENT (VISUAL OR HEARING)?

FIRST BOUT								
CONTESTANTS NAME				FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.								
CONTESTANT 2								
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS			Y / N	
SECOND BOUT								
CONTESTANTS NAME				FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.								
CONTESTANT 2								
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS			Y / N	
THIRD BOUT								
CONTESTANTS NAME				FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.								
CONTESTANT 2								
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS			Y / N	

FOURTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
FIFTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
SIXTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	

SEVENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
EIGHTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
NINTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	

TENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
ELEVENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
TWELFTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)		ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	

THIRTEENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)	ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
FOURTEENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)	ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	
FIFTEENTH BOUT							
CONTESTANTS NAME			FIGHT RECORD (W/L/D)	FIGHT RECORD Other Disciplines (W/L/D)	TRAINER	SECONDS	PURSES
CONTESTANT 1.							
CONTESTANT 2							
NUMBR OF ROUNDS		DURATION OF ROUNDS	(MINS)	CLASS	<input type="checkbox"/> BOXING <input type="checkbox"/> MUAYTHAI <input type="checkbox"/> KICKBOXING <input type="checkbox"/> MMA <input type="checkbox"/> OTHER: (Please specify)	ADDITIONAL INFORMATION PERTAINING TO THE BOUT ATTACHED?	
AGREET WEIGHT	KG	TITLE CONTEST <input type="checkbox"/> YES <input type="checkbox"/> NO		TITLE DETAILS		Y / N	

ARRIVAL DETAILS FOR INTERSTATE / INTERNATIONAL CONTESTANTS:

NAME	DEPARTURE LOCATION	ARRIVAL DATE AND TIME
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

OTHER POTENTIAL MATCH-UPS: to assist the Commission with other potential match-ups due to potential card changes, please include further details.

NAME	FIGHT RECORD	OPPONENT
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

DECLARATION:

Declaration - I declare that the information provided in this application is true and correct in every detail. I acknowledge under Section 53 of the Combat Sports Act, I must not include any false or misleading information and if I do, I am liable for a fine of up to \$12,000.

Permission to Disclose and Publish Personal Information - I give permission to the WA Combat Sports Commission to publish my personal registration details, contest records and medical details in the database of the Commission and I approve of the Commission disclosing such details to other regulatory bodies in Australia and elsewhere. The Combat Sports Commission reserves the right to film at all combat sport events for the purposes of ensuring compliance and assisting the industry to develop itself.

I have read and understood my requirement to provide sufficient financial and material resources to comply with the requirements imposed under the Act.

SIGNED:**DATE:**