



**ALABAMA ATHLETIC COMMISSION**

260 Commerce Street, 4<sup>th</sup> Floor • Montgomery, AL 36104

Phone: (334) 245-4374

Fax: (866) 715-9714

OFFICIAL USE  
by  
Alabama Athletic  
Commission  
  
Acknowledgement  
of  
Receipt

In this space, the applicant must attach a clean, full-face photo of head and shoulders taken within the past six (6) months. 2"X2" SIZE PHOTO

**APPLICATION FOR LICENSURE  
AS AN OFFICIAL**

**TYPE:**  BOXING  TOUGHMAN  
 PRO MMA  AMATEUR MMA  
(Please check only ONE TYPE above)

**Select one POSITION:**

Timekeeper  
 Judge  
 Referee

Commission's official use only:  
AAC License  
# \_\_\_\_\_ J / R / TK

I hereby make application for licensure in the State of Alabama to serve as an **OFFICIAL** under the jurisdiction of the Alabama Athletic Commission: (Separate applications are required for each Type and each Position. Each application must include a separate fee for the Position indicated.)

- 1. Full Name** \_\_\_\_\_  
(Legal name - public record)
- 2. Address of Record** \_\_\_\_\_  
(The above address is public record) *Street City State Zip* **Telephone** (\_\_\_\_) \_\_\_\_\_  
(circle one: Office/Home/Cell phone)
- 3. Mailing Address** \_\_\_\_\_  
(The above address is not public record) *Street/PO Box City State Zip* **E-mail** \_\_\_\_\_
- 4. Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Place of Birth** \_\_\_\_\_ **Social Security No.** \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy
- 5. Are you a United States citizen**  Yes  No  
If NO, do you have documentation that you are here legally?  Yes  No  
**\*\*Please provide documentation that proves your assertion**
- 6. Have you ever been convicted of any State or Federal felony?**  Yes  No  
(If Yes, a detailed statement, including a summary of the charges, the final order, any probation or parole documentation, and any other relevant information must be ATTACHED.)
- 7. Have you ever held Boxing or MMA related license (e.g., manager, competitor, second, official) in any other state?**  Yes  No  
(If yes, please LIST the State and type/position of License. )  
\_\_\_\_\_  
\_\_\_\_\_
- 8. Have you ever had a Boxing or MMA related license or registration revoked, suspended, fined or otherwise sanctioned?**  Yes  No  
(If yes, a copy of the charges and the final order must be received before your application will be processed.)
- 9. Are you or have you ever been a user of or addicted to any habit forming or unlawful substance?**  Yes  No  
(If Yes, or the results of your urinalysis is positive, you must attach proof of participation in a recognized drug rehabilitation program.)
- 10. Have you received certification through the Alabama Athletic Commission (AAC) as an Official in the TYPE events applying for licensure?**  Yes  No  
(If yes, ATTACH letter) ?
- 11. Have you received training through the Association of Boxing Commissions (ABC) as having passed the examination in the TYPE events applying for licensure?**  Yes  No  
(If yes, ATTACH proof)?

**RESTRICTIONS\*:** NO APPLICATIONS TO SERVE AS AN OFFICIAL WILL BE ACCEPTED FOR ANYONE CURRENTLY LICENSED BY THIS COMMISSION TO SERVE OR HAS SERVED WITHIN THE LAST FIVE (5) YEARS AS A PROMOTER, MATCHMAKER, TRAINER, MANAGER, SECOND OR FIGHTER.





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**TYPE:**  BOXING  TOUGHMAN  
 PRO MMA  AMATEUR MMA

**POSITION:**  Timekeeper  Judge  Referee

**EACH applicant for licensure as a Referee, Judge and Timekeeper shall meet the following requirements.** Supporting documentation must be attached to be considered for licensure. Incomplete applications will be returned to the applicant.

**RESTRICTIONS\*: NO APPLICATIONS TO SERVE AS AN OFFICIAL WILL BE ACCEPTED FOR ANYONE CURRENTLY LICENSED BY THIS COMMISSION TO SERVE OR HAS SERVED WITHIN THE LAST FIVE (5) YEARS AS A PROMOTER, MATCHMAKER, TRAINER, MANAGER, SECOND OR FIGHTER.**

1. ALL OFFICIALS: Have a minimum of five (5) years documented experience as an Official in the TYPE of professional boxing or professional mixed martial arts events for which applying, i.e., if applying for MMA official license, must indicate professional MMA experience.
2. JUDGES AND REFEREES ONLY: Have received training through the Association of Boxing Commissions (ABC) for the TYPE and POSITION for which applying. [ATTACH PROOF.]
3. ALL OFFICIALS: Have certification through Alabama Athletic Commission (AAC) as having passed the exam for the TYPE events and POSITION for which applying. [ATTACH LETTER.]
- 4.. ALL OFFICIALS: The Commission may accept satisfactory evidence of equivalent qualifications possessed by an applicant who is currently licensed and in good standing in another state or country and meets all other ABC and AAC requirements.

**A. WORK EXPERIENCE (\*see above licensure restrictions):** List on the attached Official’s Professional Work Experience form, your professional work experience relevant to the TYPE (Boxing or MMA) that you are applying, including employers’ names, addresses, phone numbers and dates of service.

- When listing professional experience as a REFEREE, please include the results of the professional matches in which you served as Referee and the name of the Judge who scored the match.
- When listing professional experience as a JUDGE, please include the results of the professional matches in which you served as Judge and the name of the Referee who refereed the match.
- When listing professional experience as a TIMEKEEPER, please include the results of the professional matches in which you served as Timekeeper and the name of the Referee who referred the match.

**B. CHARACTER REFERENCES:** Please provide below the names and current contact information (name, address, & phone) of three (3) references who can attest to your proficiency as a Referee, Judge, OR Timekeeper.

<b>NAME:</b>	<b>ADDRESS:</b>	<b>TELEPHONE #:</b>
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**I CERTIFY** that I have read the AAC Administrative Code and will comply with the State Laws and Rules governing the license and service for which this application is being submitted and understand the responsibilities.

\_\_\_\_\_  
*Signature of Applicant*

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_



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## OFFICIAL'S PROFESSIONAL WORK EXPERIENCE

<b>SELECT ONE OF EACH:</b>	<b>TYPE:</b> <input type="checkbox"/> Boxing <input type="checkbox"/> Toughman <input type="checkbox"/> Pro MMA <input type="checkbox"/> Amateur MMA
	<b>POSITION:</b> <input type="checkbox"/> Timekeeper <input type="checkbox"/> Judge <input type="checkbox"/> Referee

PRINT NAME: \_\_\_\_\_

**INSTRUCTIONS:** Refer to item A. on page 2 of application and document a minimum of five (5) years professional experience. Include the name of the other Official. All experience must be for the same TYPE events that you are applying, i.e., MMA or Boxing.

<b>PROMOTER'S NAME</b> _____	<b>PHONE NUMBER:</b> _____
<b>PROMOTER'S ADDRESS</b> _____	<b>CITY &amp; STATE EVENT HELD:</b> _____
<b>DATE of SERVICE/EVENT:</b> ____/____/____ mm dd yyyy	<b>SERVED AS</b> _____ (Indicate Judge, Referee, or Timekeeper)
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____

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Bout between _____ vs. _____	Results: _____ Official: _____
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Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
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Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____
Bout between _____ vs. _____	Results: _____ Official: _____

If more space is needed to list professional work experience, please COPY this form or attach a separate sheet listing this information.

NOTE: Incomplete applications will be returned to the applicant. Application and supporting documentation must be submitted to be considered for licensure. All fees are non-refundable.