

ID Issued: _____

POSSE # _____

Edmonton Combative Sports Commission Officials Licence Application

Event Referee	\$200 <input type="checkbox"/>	Event Judge	\$200 <input type="checkbox"/>	Event Ring General	\$200 <input type="checkbox"/>
Event Referee (Boxing Only)	\$100 <input type="checkbox"/>	Event Judge (Boxing only)	\$100 <input type="checkbox"/>	Any Other Official	\$50 <input type="checkbox"/>

APPLICANT'S LEGAL NAME (Last, First, Middle name or initial)

IDENTIFICATION (PICTURE):

Phone / contact:

Date of Birth:

MAILING ADDRESS

CITY

PROVINCE

POSTAL CODE

E-MAIL ADDRESS:

Have you ever been disciplined by a boxing/MMA or Combative sports Commission authority? **Yes / No**

a) If "Yes", provide details & allegation, including the date and the Commission Authority.

b) Result:

Have you ever been charged or convicted of a criminal offence? **Yes / No**

a) If "Yes", provide details, including the date and location.

b) Result:

Please provide a summary of your experience in officiating Combative Sports for the past 5 years. Resume, fully outlining experience, with references is preferred.



P.O. Box 2359
Edmonton, AB
T5J 2R7

Authorization to Disclose Information

- I hereby authorize the City of Edmonton or representatives to transmit any information contained in this application, or in any document required to be filed herewith, or any suspension information related to my participation as an official to any governing combative sports body, Municipality, Province, State or Tribal Governing body for combative sports regulatory purposes. **Initial** _____

Acknowledgement of Policies, Procedures and Code of Conduct

- I confirm that I have read all the rules and regulations of the Edmonton Combative Sports Commission, including the Officials Code of Ethics. **Initial** _____

Acknowledgement for Event Participation Rule

- Pursuant to ECSC Policy #3, Procedure 7, and section 7(3) of Bylaw 15594, I acknowledge that receiving an officials licences does not guarantee I will be automatically selected to officiate any event. Selection of event officials is at the discretion and prerogative of the Executive Director or designate. **Initial** _____

Name: _____ **Signature:** _____ **Date:** _____

Approval by Executive Director (or designate) _____ **Date:** _____

Please note, failure to fully complete this application may result in denial of a license being granted.