



CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC.
P.O. Box 4641 Riverside, CA 92514
INTERNET: www.camo-mma.org
PH: (213) 908-2185; FAX: (213) 908-2186 or (888) 663-9915

OFFICIAL'S APPLICATION FOR LICENSE AGREEMENT AND WAIVER

ORIGINAL RENEWAL

TYPE OF LICENSE AND ANNUAL FEE (Please check appropriate box):
All items must be submitted before we can process the application.

- Matchmaker \$75
- Judge \$40
- Referee \$40
- Inspector/Timekeeper \$25

Office Use Only

License # _____
Date App Received _____
Amount Received \$ _____
Method of Payment _____
Check Number _____
Received By _____
Receipt # _____

Approve for License:

FULL NAME: (Print) Last First Middle

ADDRESS: Street (No PO Box) City State Zip Code

Home Phone

Alternate Phone

Social Security #

Birth Date

Email Address:

Do you have a financial interest in any club/promoter, corporation, organization, or association conducting boxing, martial arts, or exhibitions in the state? **YES** **NO** If answer is yes, give name(s)

Do you have a financial interest in any boxer or martial arts fighter? **YES** **NO**
If answer is yes, give name(s) and explain

Are you licensed in any other state? **YES** **NO**
If answer is yes, give, state, license type and expiration date

Have you ever been convicted of any offense other than minor traffic violations? **YES** **NO** (You must answer "Yes" even if a conviction or plea of guilty was changed, withdrawn, dismissed, discharged, set aside, or pardoned under Section 1203.4 of the Penal Code). If answer is yes, please explain and attach a copy of the conviction

Have you ever had a license suspended, revoked, disciplined, or fined by the California State Athletic Commission or by any other Commission? **YES** **NO**
If answer is yes, please explain

Have you ever used any other name(s)? **YES** **NO**
If answer is yes, please explain

Have you ever participated, or been affiliated with any unsanctioned or unregulated combative sports events?
 YES **NO** If answer is yes, please explain

Experience and Qualifications:
List experience and qualifications (attach if necessary)

Matchmaker Applicants Only – Give details of financial agreements with your promoter/club; state whether you receive a salary or percentage of net profit or gate receipts. If you are under contract to a promoter/club, submit a copy of the contract.

Person to Notify in Case of Emergency:

Name: _____ Relationship: _____
Address: _____ Phone Number: _____
City: _____ State: _____ Zip Code: _____

All items in this application are mandatory; none are voluntary. Failure to provide any of the requested information will result in the application being rejected as incomplete. The information provided will be used to determine qualification for licensure.

For good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, I hereby agree to the following:

1. I have read and reviewed and hereby agree to comply with and to be bound by the Amateur Mixed Martial Arts Rules as adopted and modified from time to time by the California Amateur Mixed Martial Arts Organization, Inc. (“CAMO”).

2. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS CAMO, its directors, agents, officers, volunteers, employees, and other officials licensed by CAMO, and any sponsors and/or advertisers (hereinafter, collectively the “Releasees”) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the ordinary active or passive negligence of the “Releasees,” in connection with Mixed Martial Arts and/or Pankration activities, including negligent rescue operations, and I further agree that if, despite this release, I, or anyone on my behalf makes a claim against any of the Releasees based on claims or causes of action for which I have released those Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

3. I have read this Application, Agreement and Waiver and fully understand it’s terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this Agreement is held to be invalid that the balance, notwithstanding, shall continue in full force and effect.

I declare under penalty of perjury under the laws of the State of California, that I have read the foregoing application for a license, agreement and waiver, that all the answers given are my own and that all the answers are true of my own knowledge. Further, I understand and agree that any misstatement of material fact in this application will constitute grounds for denying or revoking the license.

Accepted and Agreed:

Applicant’s Signature

Date