

CALIFORNIA AMATEUR MIXED MARTIAL ARTS ORGANIZATION, INC. INTERNET: www.camomma.org

NTERNET: www.camomma.org E-MAIL: info@camomma.org FAX: (888) 663-9915

## **EVENT REQUEST**

Amateur MMA [ ] Pro-Am MMA [ ]							
PROMOTER:	DATE OF THIS REQUEST:						
DATE OF PROPOSED EVENT:	VENUE NAME AND ADDRESS	OF PROPOSED EVENT:					
START TIME (FIRST FIGHT):	TELEVISION COVERAGE/NET	WORK:					
MATCHMAKER:	WEIGH-IN LOCATION:	WEIGH-IN DATE:					
WEIGH-IN START TIME:	VENUE SEATING CAPACITY:						
The state of the s	No						
Please indicate if the above venue is outdoors: [ ] YES							
<b>EVENT &amp; OFFICIAL FEES DUE:</b> CAMO Event Fees shall be paid to CAMO no later than three weeks prior to the scheduled event. No event will be either authorized or announced on the CAMO Event Calendar unless event fees have been paid. Event Fees are nonrefundable. In accordance with MMA Rule 901, CAMO will designate the officials for the event, but the officials will be employed and compensated by Promoter, not CAMO. Prior to the event commencing, Promoter shall provide the Lead Inspector with an envelope containing cash payment for all of the officials.							
FULL DISCLOSURE: Is there any person or business entity,	other than the licensed promoter	of record for this event that will					
receive revenues or other compensation from the sale of tick other concessions in conjunction with the promotion of the pr	ets or from the sale of souvenirs, p	programs, broadcast rights, or any					
If YES, Please include copies of contractual arrangement	ts. If YES, please provide complet	te details to include Name, Address					
Telephone Number and Anticipated Revenue Source (ticket s Space* on the next page if necessary.	sales, television rights, concession	ns, etc.). Use Additional Information					



WAIVER & RELEASE: The undersigned Promoter understands and acknowledges that the doctor(s), inspectors, judges, referees, timekeepers, and other officials licensed by CAMO (hereinafter the "Officials"), who will be assigned by CAMO to participate in the event, are not employees of CAMO, but will be hired by the Promoter for the event. Promoter understands and accepts the risk that one or more of those Officials may, for some valid or invalid reason fail, refuse, or be unable to promptly or ever fulfill that assignment. Should this occur, the event may be delayed, be unable to go forward, or be cancelled. For most circumstances, the Officials can be replaced, but the doctor(s) can be difficult to replace. For this reason, CAMO recommends, but does not require, that Promoter hire two ringside physicians to reduce this risk. CAMO may, in its sole discretion, assign multiple ringside physicians as circumstances may indicate. Regardless of whether Promoter elects to hire the recommended number of doctors or Officials, Promoter agrees to accept these risks, and for good and valuable consideration received, hereby releases, discharges, holds harmless, covenants not to sue, and agrees to indemnify and defend the CAMO and its Officials from all liability, causes of action, claims, demands, losses or damages, caused or alleged to be caused in whole or in part by the failure, refusal or delay, of one or more of the Officials to timely fulfill their assignments at the event, including when due to the active or passive negligence of CAMO or the Officials.

PROMOTER:				
By (Signature)		 		
Date:				
*Additional Information	on Space:			