

APPLICATION FOR WRESTLING PERMIT

State of Ohio Athletic Commission
242 Federal Plaza West Suite 405
Youngstown, OH 44503
Office: 330-797-2556
Fax: 330-797-2559

PERMIT FEE:
\$100.00

This permit must be made available to any official representing the Ohio Athletic Commission or to any law enforcement officer upon request.

Date of Event: / /	Starting Time	Location of Event	
Address: Street and Number		City	Zip code
Phone Number ()	Seating Capacity	Admission \$ \$	Contact Person
Promoter:		License Number	Phone Number ()
Address: Street and Number		City	State Zip Code
Name of Organization or Promotion			Email Address
Authorization Signature of Executive Director		Make Checks payable to: TREASURER STATE OF OHIO	

By applying for this permit I agree to conduct this event abiding by all rules and regulations of section 3773 of the Ohio Administrative Code. I understand that if I violate any of the rules of the Ohio Administrative Code I may be fined and my Promoter's license may be suspended or revoked.

Revised 5/2010