

MISSISSIPPI ATHLETIC COMMISSION

The Undersigned, having paid for the legal fee of \$25 as provided in the Mississippi Athletic Commission rules and regulations hereby makes application for license as a trainer-second.

Legal Name _____

SSN _____ Birth Date _____ Phone _____

Address _____

City _____ State _____ Zip _____ Email _____

American Citizen _____ Occupation _____

Have you ever been penalized, disciplined, or suspended by any Boxing Commission? _____

If yes, where and when _____

Approximately how many fighting events have you worked as trainer-second? _____

How many years have you worked as a trainer-second? _____

Have you ever competed in Boxing? _____ Record _____

If granted this license I agree to familiarize myself with the rules and regulations of the Mississippi Athletic Commission and observe them in their entirety.

I, the undersigned, do hereby certify that the above information is correct to the best of my knowledge.

This the _____ day of _____, 20__.

Signature

<p>Approved By: _____</p> <p>Payment Method: _____</p> <p>License Number: _____</p>
