



**New York State
DEPARTMENT OF STATE
STATE ATHLETIC COMMISSION
123 William Street
New York, NY 10038-3804**

Telephone: (212) 417-5700
www.dos.ny.gov/athletic

Professional Wrestling Notification Form

NOTICE TO PROMOTER: The New York State Athletic Commission (“NYSAC”) requires that all professional wrestling promoters submit this form **at least 10 days** prior to any professional wrestling event. New York Unconsolidated Laws Section § 8929(1): “[e]very individual, corporation, association or club holding any ... professional wrestling match or exhibition, for which an admission fee is charged or received, shall notify the athletic commission ten days in advance of the holding of such contest.”

Each question must be completely answered. Failure to answer all questions will result in the automatic rejection of this notification. Please fax this form to the number below or email to promoterCR@dos.ny.gov **at least 10 days** before the proposed date.

1. Name of promoter submitting this request: _____

1b. Telephone number or email address of promoter: _____

2. Are you currently licensed by NYSAC: Yes No

3. Date of proposed event: _____

4. Address/Venue of proposed event: _____

5. Time of proposed event: _____

6. Have you already retained a licensed New York physician for the event? * Yes No
 If yes, please provide the physician's name, address, and telephone:
 Name: _____
 Address: _____
 Telephone: _____

* Failure to retain a NYS physician is a violation of the Unconsolidated Laws and may result in appropriate disciplinary action including: reprimand, fines, suspensions and/or revocation.

Promoter Name (or approved signatory): _____

Signature: _____ (Print Name)
 _____ (Sign Name)

FOR COMMISSION USE ONLY

Commission approval: Granted Denied: Reason
 (Event Code No: _____)

Commission Representative: _____ Date: _____
 _____ (Sign)