PROMOTER LICENSE APPLICATION

$_____ Fee Paid: ☐ Yes ☐ No

Promotion Name: _____

Today's Date: _____ Date of Event: _____

Is the Applicant a Corporation: ☐ Yes ☐ No If Yes Name: _____

Owner(s) Name: _____ _____
First Middle Last First Middle Last

Address: _____ _____

_____ _____

_____ _____

Date of Birth: _____ _____

Phone Number: _____ _____

Fax Number: _____ _____

Email: _____ _____

Please attach the following Documents:

Resume of Background and experience as it relates to the events over the past 5 years. Including a list of any suspensions or hearing in other jurisdictions. ☐

The address for the registered office (for Corporations only) ☐

Police information check from the RCMP (for individuals only) ☐

Names and address of all officers, and directors (for Corporations only) ☐

Police information check from the RCMP for each director (for Corporations only) ☐

_____ _____ _____
Applicant Name Printed Date