



# OKLAHOMA

State Athletic Commission

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## APPLICATION FOR VENDOR

License Fee \$50.00

Person in Charge of Event: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

### INDIVIDUAL APPLICANT

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Business Telephone: (\_\_\_\_) \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Social Security Number \_\_\_\_\_ Email: \_\_\_\_\_

I certify that I have read the foregoing application for vendor, that all answers are true and correct to the best of my knowledge. I further understand and agree that any misstatement of fact in this application will constitute grounds for revoking this license.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### CORPORATE APPLICANT

Corporate Business Name: \_\_\_\_\_ FEI No. \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Business Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

I (We) certify that I (we) have read the foregoing application for vendor, that all answers are true and correct to the best of my (our) knowledge. I (We) further understand and agree that any misstatement of fact in this application will constitute grounds for revoking this license.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Officer Signature By: \_\_\_\_\_  
Attest: Corporate Secretary: \_\_\_\_\_  
Date: \_\_\_\_\_