



CANNON BUILDING  
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DOVER, DELAWARE 19904-2467

STATE OF DELAWARE  
**DIVISION OF PROFESSIONAL REGULATION**  
**COMBATIVE SPORTS**

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## COMBATIVE SPORTS SAFETY AND SECURITY FORM

### INSTRUCTIONS

Provide your Application ID and the Business Name of the Promoter below. Complete the form and either:

- upload the form with your Application in DELPROS *or*
- select the Submit Additional Documentation option from the Options Menu of the Combative Sports Entertainment Event application on your DELPROS Dashboard.

Enter your Application ID: \_\_\_\_\_ Business Name of Promoter: \_\_\_\_\_

### APPLICANT INFORMATION

1. Full Name: \_\_\_\_\_  
First Middle Last

**SAFETY AND SECURITY** – You are **required** to hire two EMTs and an ambulance and adequate security.

Enter the contact information:

2. Ambulance Service: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Security Agency Name: \_\_\_\_\_ Personnel Phone: \_\_\_\_\_

**UPLOAD THIS DOCUMENT WITH YOUR APPLICATION IN DELPROS OR SUBMIT IT AS ADDITIONAL DOCUMENTATION FROM YOUR DELPROS DASHBOARD.**