



CURRENTLY IKF LICENSED FIGHTER - UPDATE FORM -

IKF USE ONLY

"PLEASE PRINT NEATLY" IF WE CANNOT READ YOUR PRINTING YOUR BOUT WILL BE CANCELLED!

BOUT: _____

CORNER: _____

1. FIRST NAME [grid] Height: ___' ___"

2. LAST NAME [grid]

3. AGE [] Birthday (Month, Day & Year): [] / [] / [] MALE [] FEMALE []

4. City: _____ State: _____ Zip: _____ Country: _____

5. PHONE ([] [] []) [] [] [] - [] [] [] E-MAIL: _____

6. DATE OF THIS EVENT: M: _____ D: _____ YR: _____ EVENT CITY: _____ STATE: _____

7. WHEN WAS YOUR LAST BOUT: ___ / ___ / ___ WHERE: _____ RESULT: _____

8. ARE YOU UNDER ANY SUSPENSION BY ANY STATE COMMISSION OR SANCTIONING BODY? IF SO EXPLAIN: _____

9. EVER FOUGHT AS A PRO FIGHTER? _____ EVER BEEN KNOCKED OUT AND IF SO, WHEN: _____

10. AMATEUR FIGHT RECORD WITH WINS BY KO/TKOS - IF ANY - IF NO FIGHTS WRITE -0- IN ALL BLANKS

- MUAY THAI & KICKBOXING WINS LOSES DRAWS WINS BY KO/TKO NO CONTEST OR DQ
SMOKER / IN GYM WINS LOSES DRAWS WINS BY KO/TKO NO CONTEST OR DQ
MMA WINS LOSES DRAWS WINS BY KO/TKO NO CONTEST OR DQ
PANKRATION WINS LOSES DRAWS WINS BY KO/TKO NO CONTEST OR DQ
BOXING WINS LOSES DRAWS WINS BY KO/TKO NO CONTEST OR DQ

11. TRAINERS NAME: (List SELF if you train yourself) _____

12. MANDATORY: Trainers/Contact Number: (_____) _____

13. FEMALES ONLY: Are you Pregnant? YES NO

PREGNANCY ADVISORY NOTICE ALERT: If you participate in combative sports when you are pregnant you could have a miscarriage or you and or your fetus could suffer permanent injury or death.

This is a Legal Amateur Status Confirmation Form binding You as the FIGHTER, The IKF (International Kickboxing / Muay Thai Federation) The Event Promoter & any & all companies, federations or organizations associates, officials, employees & staff related to the FIGHTER AND The EVENT named above.

VOLUNTARY APPLICATION. I acknowledge and state that I have ACCEPTED to compete in the above EVENT on the DATE ABOVE as an AMATEUR Fighter. I confirm under penalty or perjury that as of the EVENT DATE noted above and below, I have Never been Paid, Contracted or Fought as a Professional Kickboxer, Muay Thai Fighter, Mixed Martial Arts Fighter or Professional Boxer EVER.

PENALTY, FINES & SUSPENSIONS FOR PRO FIGHTERS FIGHTING AS AN AMATEUR: I fully understand that if I have not been truthful with any of the above questions that I will be responsible for the following MINIMUM disciplines: Fined \$1,000.00 by the IKF, Suspended for a minimum of 90 days.

MEDICAL SAFETY: Have you suffered any knockouts (KO's), technical knockout's (TKO's) loss of consciousness or been stopped or injured IN THE LAST 30 DAYS PRIOR TO THIS EVENT in a bout, sparring or in any other activity? YES NO

If yes, please list and give dates and details: _____ I declare under penalty of perjury under the rules and regulations of the IKF, that all provided information on this form is true and correct AND I realize that any intentional misrepresentation may result in disciplinary action against me.

Executed on the _____ day of the month of _____, in the year 20_____.

FIGHTER: _____ Print Name: _____

TRAINER: _____ Print Name: _____