

IKF PRO FIGHTER LICENSE REGISTRATION FORM

Every Fighter who registers with the IKF is placed into the Official IKF Rankings / Database. The IKF is the ONLY Sanctioning body for Muay Thai, Kickboxing & San Shou that has a fighter Rankings and database system for both Amateur & Professional Fighters. The rankings / database include all necessary info for every Licensed IKF Fighter.

Name, City, State, Country, Fight Record, Weight, Height, Date of Birth, Trainers Name, Contact Info.

BELOW IS THE IKF PROFESSIONAL FIGHTER LICENSE REGISTRATION FORM:

IKF PRO FIGHTER LICENSE REGISTRATION FORM

IKF STAFF USE ONLY

To Register Print out This form & **MAIL** to the **IKF** with Your Fee & **Headshot Photo** To IKF,
P.O. Box 1205, Newcastle, CA, 95658
or Fax to (916) 663-4510 or scan and e-mail to main@ikfkickboxing.com

- SENT: ___/___/___
- REC: ___/___/___
- PAID: \$ _____
- PHOTO: _____

YEARLY FIGHTER LICENSE FEE IS \$20.00 PER YOUR **ANNIVERSARY YEAR

(**) 365 DAYS FROM WHEN YOU REGISTERED - 1 FULL YEAR

REGISTRATION FORMS WITHOUT FEES WILL BE DISPOSED OF.

----- "PLEASE PRINT NEATLY" -----

IF WE CANNOT READ YOUR PRINTING, YOUR REGISTRATION WILL NOT BE ACCEPTED

1. **NAME: FIRST:** _____ **LAST:** _____ **MIDDLE:** _____

2. P.O. Box Or Physical Street Number: _____

3. City: _____ State: _____ Zip: _____ Country: _____

4. Your Average Weight: _____ lbs. - Height: ____' ____" Age: ____ & Birthday (mo, day & year): ____/____/____

5. YOUR Contact Number: (_____) _____

6. Have you ever used any other name(s)? ___ YES ___ NO - ___ Male ___ Female

7. If yes, list name(s): _____

8. Trainers Name: (*List SELF if you train yourself*) _____

9. **MANDATORY:** Trainers/Contact Number: (_____) _____

10. **AMATEUR FIGHT RECORD - WITH WINS BY KO/TKOS - IF ANY -**

- KICKBOXING _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- MUAY THAI _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- MMA _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- BOXING _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO



11. **PRO FIGHT RECORD - WITH WINS BY KO/TKOS - IF ANY -**

- KICKBOXING _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- MUAY THAI _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- MMA _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO
- BOXING _____ WINS _____ LOSES _____ DRAWS _____ WINS BY KO/TKO

12. Have you ever been disqualified in any competition? ___ YES ___ NO

If yes, please explain: _____

13. Upcoming Fight Date (If One) ____/____/____ - Upcoming Fight Promoter: _____

14. Upcoming Fight City & State: _____

15. Last Opponent (If one): _____

Where: _____ Date of Bout: ____/____/____ Result (Win or Lose etc): _____

16. Are you currently licensed with the IKF, or any State Athletic / Boxing Commission _____ If So, please provide the following information for each license:

TYPE OF LICENSE

YEAR OF LICENSE & STATE

17. **EMERGENCY CONTACT INFORMATION**

Name _____ Relationship _____ Contact# _____

18. I certify the above is true by my signature here: _____, Date: ____/____/____

IKF Muay Thai - IKF Kickboxing - main@ikfkickboxing.com

www.IKFKickboxing.com - www.IKFMuayThai.com

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