

**QCBB PROMOTIONS PRESENTS:**



**2017 - SEASON \* MARRIOTT @ HERON BAY - CORAL SPRINGS**

To register to fight in one of our events, you must complete the following form. online you can download a print friendly copy. The form must be completely filled out and returned to: **QCBB PROMOTIONS, LLC. - P.O. BOX 880171 BOCA RATON, FL 33488**

## FIGHTER REGISTRATION FORM

**PARTICIPANTS NAME\***

**FIRST:** \_\_\_\_\_

**LAST:** \_\_\_\_\_

**MIDDLE INITIAL:** \_\_\_\_\_

**GENDER:**                      **MALE**                       **FEMA**

**DATE OF BIRTH:** \_\_\_\_\_

**AGE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TEAM/GYM AFFILIATION:** \_\_\_\_\_

**AMATEUR FIGHT RECORD - WINS:** \_\_\_\_\_

**LOSSES:** \_\_\_\_\_

**DRAWS:** \_\_\_\_\_

**INTENDED BOUT WEIGHT: lbs.** \_\_\_\_\_

**CURRENT WEIGHT: lbs.** \_\_\_\_\_

**YEARS TRAINING:** \_\_\_\_\_

**FIGHT STYLE (Check All that Apply):**

**MMA**  \_\_\_\_\_

**BOXING**  \_\_\_\_\_

**KICKBOXING**  \_\_\_\_\_

**TOURNAMENT AND/OR CHAMPIONSHIP TITLES & OTHER MENTIONS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COACHES NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**Notes:**

Fighters older than 40 years of age need to get an EKG Test and a doctor's note. MMA Fighter's blood work and test requirements: HEP C = Antibody Test, HEP B = Surface Antigen Test, HIV. All 3 tests should be renewed every 6 months. Dilated eye exam is good for one year. Female fighters will be tested for pregnancy at weigh-in. **WEIGH-IN WILL BE ON THURSDAY NOVEMBER 2ND, LOCATION TBD. [WWW.PRESTIGEFIGHTNIGHTS.COM](http://WWW.PRESTIGEFIGHTNIGHTS.COM)**

**BOUT DATE: NOVEMBER 3rd, 2017 - MARRIOTT HERON BAY GOLF CLUB & CONVETION CENTER**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_