# AMATEUR BOUT AGREEMENT

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| --- | --- |
| Date | Contract weight |
| **Combatant** | **Opponent** |
| **Promoter** | **Venue** |
| **Will bought be televised?** Yes / No  | **Recorded for later resale or viewing?** Yes / No |
| **Will this bout be for a title?** Yes / No | Read entire contract before signing. |
| The above stated Promoter and Combatant agree with each other to induce acceptance of this bout agreement, as follows:**1. BOUT AND WEIGHT.** Combatant shall appear and enter into an **amateur mixed martial arts** bout at the stated venue for the Promoter at the proposed weight on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date), or on a date to be agreed upon not later than \_\_\_\_\_\_\_\_ weeks from the date set forth above, for \_\_\_\_\_\_\_\_\_ rounds to a decision. Contract Weight means the weight that the bout is proposed for. Record only the **exact** Contract Weight and note any allowance to be given; not to exceed 2 pounds. **2. WEIGH-INS.** Combatant shall appear for the weigh-in at \_\_\_\_\_\_\_\_ (time) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (location); Promoter shall promptly inform Combatant if the time, date, or location of the weigh-in changes.**3. INCIDENTALS.** Combatant shall be entitled to transportation, lodging, and meals or meal allowances. Promoter shall provide \_\_\_\_\_ hotel or motel rooms for \_\_\_\_\_\_ nights. Promoter shall provide $\_\_\_\_\_\_\_\_\_\_\_\_ for travel by Combatant’s own ground transportation or \_\_\_\_\_\_ round-trip economy class airline ticket(s) from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and $\_\_\_\_\_\_\_\_\_\_\_\_ for transportation from the airport. Promoter shall provide \_\_\_\_\_\_ meal vouchers or $\_\_\_\_\_\_\_\_\_ for meals.Promoter shall cover the cost of \_\_\_\_\_\_\_\_\_ Combatant license(s) and \_\_\_\_\_\_\_\_\_\_\_\_ Trainer/Second license(s). Promoter shall cover the cost of the following medical licensing requirements (check all that apply): Blood Work Testing Physical Exam Dilated Eye Exam Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Additional items to be paid for by Promoter:1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **4. CONFLICTING BOUT AGREEMENTS.** The Promoter and Combatant agree that they have not and will not enter into any other bout agreement, written or oral, that may conflict with this contract. |
| **IMPORTANT DISCLOSURE INFORMATION**I declare under penalty of perjury under the laws of the State of Minnesota, that the foregoing information is a complete, true and correct disclosure of the terms of the bout agreement; further I realize that any misrepresentation may result in disciplinary action against my license. |
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| **DATE** | **COMBATANT** | **DATE** | **PROMOTER** |