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WKF TITLE FIGHT APPLICATION

Please provide the following information.

Promoter of Event:
Date of Event:
Venue:
City, State and Country:
Level of Title: (National, Continental, Intercontinental, World)

Style of BOXING: BOXING / BARE KNUCKLE

Weight category:

Is the fight for a vacant title, Yes or No?

If "NO" then please provide the following:

Champion:

(Please include, full name, city, Gym and country they are from, complete fight record and previous titles held)

Proposed Challenger: (Please include, full name, city, Gym and country they are from, complete fight record and previous titles held)
If "YES" then please provide the following:
Proposed Fighter #1: (Please include, full name, city, Gym and country they are from, complete fight record and previous titles held)
Proposed Fighter #2: (Please include, full name, city, Gym and country they are from, complete fight record and previous titles held)
Date, sign and stamp of the promoter