



USFL AGREEMENT TO FIGHT

We, the following named contestants "A" and "B", have been selected to compete against each other in the Youth Pankration Show on _____ at _____

Contestant "A"

Contestant "B"

Will be _____ years old

Will be _____ years old

on the date of the event.

on the date of the event

We agree to weight between **(LOWEST) _____ lbs.** and **(HIGHEST) _____ lbs.**

NOTE - The bout may be listed under a higher rounded up weight, but this form will indicate the official weight parameters to include penalty points for overweight athletes)

- I agree to sustain from all other risky competitions and practices one week prior to my scheduled bout, and I will advise at my earliest convenience if I must withdraw from my bout.
- I will be competing under Class "B" Youth Pankration rules and know and understand these rules
- I will weight at my agreed weight class, at the agreed time and location, approximately 3 hours prior to start the event. I will receive ½ pound allowance for undergarments or shorts, which must be worn during weights in.
- If, I am overweight, but still within the maximum weight parameters, I may be able to compete but with 2 points per pound penalty. If, I or my opponent are outside the listed maximum weight parameters, I will not be permitted to fight under Class "B" Pankration rules.
- I will show up on time, equipped with a Rash Guard, Fight shorts, Mouthpiece and approved Shin Guards, Headgear and MMA gloves.

I agreed to hold harmless, the United States Fight League Inc., and

all employees, volunteers, agents and associates named and unnamed, in the event of injury and seriously injury occurring, during, prior and following the Youth Pankration Show. I understand the participation in this event/activity has a certain amount of risk of injury, serious injury or death. I acknowledge, I am medically fit and have no medical condition that would pose a health risk to my opponent or myself. In the event of an emergency, I hereby authorize any licensed medical personnel to perform any accepted medical procedure deemed necessary, and I understand that I may be required to bear the expense for such treatment. I understand and agree that I may be photographed and/or filmed during this event. I further agreed and understand that my image may be displayed in magazines, web sites, DVD's, videos and other sources of media without further notice or action.

I am the parent or the guardian of the youth participant and fully authorized to sign this agreement on their behalf.

PARENT/GUARDIAN OF "A"

PARENT/GUARDIAN OF "B"

SIGNATURE OF PARENT "A" DATE

SIGNATURE OF PARENT "B" DATE