

### Cyrus fighter request form

Representative: .....

Name\*: First name ..... Middle ..... Last name .....

Gender\*: Male  Female

Nationality\*: .....

Residence\* .....

Address:

.....  
.....

Date of birth\*: ..... age: .....

height (cm)\*: .....

walking weight (kg)\*: ..... fight weight (kg)\*: .....

Gym name: .....

interested in\*: Muaythai  Kickboxing  Boxing  MMA  BJJ  Taekwondo

Records: Style ..... Total ..... Win ..... Lose ..... Draw .....

last fight result

Style ..... Date ..... Tournament ..... Place ..... Result .....

Second last fight result

Style ..... Date ..... Tournament ..... Place ..... Result .....

Third last fight result

Style ..... Date ..... Tournament ..... Place ..... Result .....

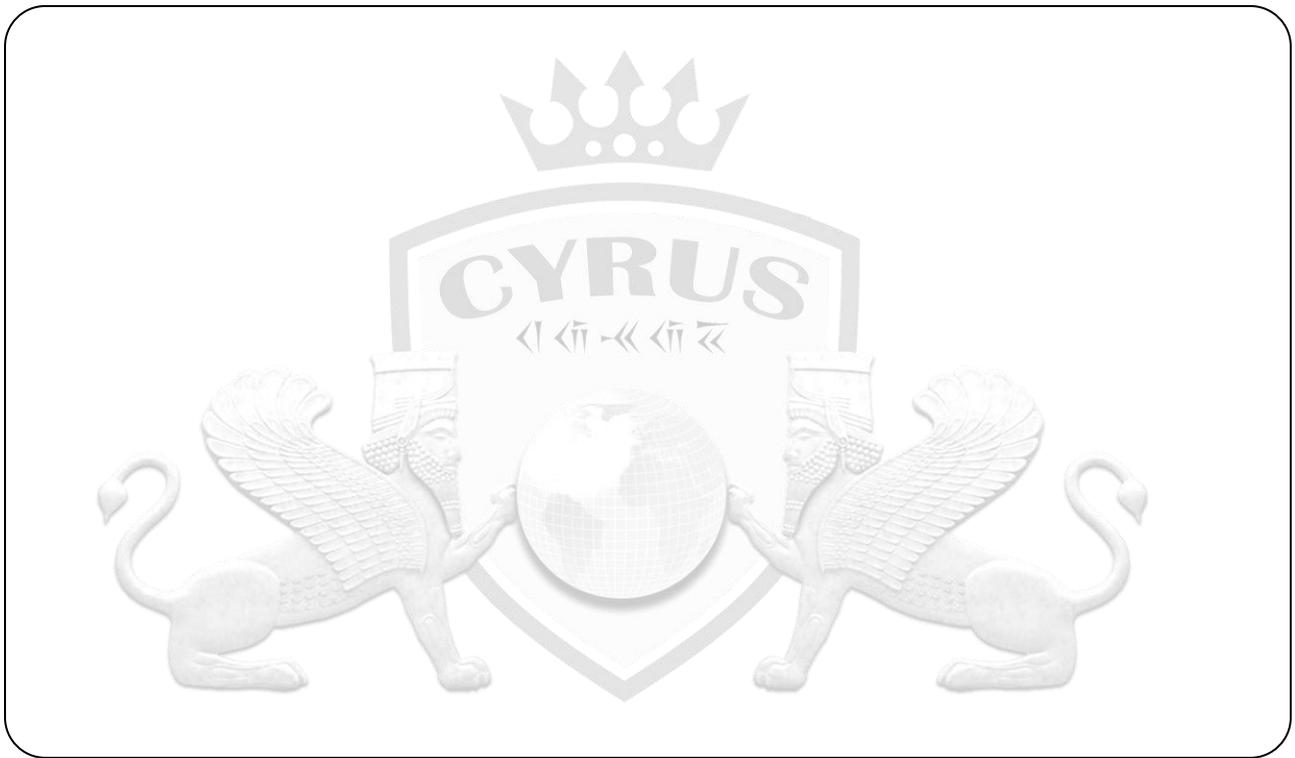


Phone: .....

Email: .....

Instagram ID: .....

Accomplishments



Fill the form carefully and prepare the following items, then go to the official page of Cyrus through the following link or QR code and transfer your information.

- Picture\* Photo of upper body fighter (For men without clothes)
- Video link: Full fight video link. please don't send highlight video



<https://sportdvp.com/cyrus-fighter-request-application>