

Name:

Number:

Nationality:

Gender:

Opponent Number	Won	Lost	Your Points	Opponent's Points
1				
2				
3				
4				
5				
6				
7				
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30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
<b>Totals:</b>				
<b>Points difference:</b>				

The information on this form will be used on the fightnightcombat.com website. Enter your name as "Anonymous" if you don't want to be listed. Photos and videos captured during the tournament may be used and displayed on the website and associated social media.