



# RENEWMD

## IFBB Athlete Professional Sponsorship Application

**PLEASE PRINT CLEARLY**

### **I-GENERAL INFORMATION:**

First Name: \_\_\_\_\_ Mid Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Best Contact Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **II-PROFESSION AND SOCIAL:**

IFBB Pro Debut Year: \_\_\_\_\_ Active IFBB Pro: \_\_\_\_ YES \_\_\_\_ NO Representing State of: \_\_\_\_\_

Do you have a website: \_\_\_\_ YES \_\_\_\_ NO: if yes, please list here: \_\_\_\_\_

Instagram: \_\_\_\_ YES \_\_\_\_ NO: if yes, please list here: \_\_\_\_\_

Facebook: \_\_\_\_\_ TIK TOK: \_\_\_\_\_

Occupation: \_\_\_\_\_ Level of Education: \_\_\_\_\_

### **III-WRITTEN RESPONSE:**

**PLEASE PRINT CLEARLY**

Why did you choose the bodybuilding lifestyle: \_\_\_\_\_

\_\_\_\_\_

What are the three top priorities currently in your life: \_\_\_\_\_

\_\_\_\_\_

Who inspires you and why: \_\_\_\_\_

\_\_\_\_\_

Describe your character: \_\_\_\_\_

\_\_\_\_\_

What is one of the most VALUABLE lesson(s) you have learned during the process of achieving your IFBB pro card: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Continue:

What is **THE ONE THING** we absolutely need to know about you: \_\_\_\_\_  
\_\_\_\_\_.

While working to reach your IFBB pro card, what was the single biggest mistake you made: \_\_\_\_\_  
\_\_\_\_\_.

What is the **BEST** piece of advice you ever received and from who: \_\_\_\_\_  
\_\_\_\_\_.

What would you say is the single worst thing about yourself: \_\_\_\_\_  
\_\_\_\_\_.

**IV-CONCLUSION:**

Explain to the best of your ability, why RENEWMD-USA should select you as its representative AND what you will bring to the partnership as its PROFESSIONAL IFBB sponsored athlete: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**V-REFERENCES:**

<b>Name:</b>	<b>Relationship:</b>	<b>Best Contact Number or Email:</b>
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____

**IMPORTANT:** PLEASE submit: (1) this application, (2) professional resume, and (3) your FAVORITE photo which can be used in conjunction with RENEWMD-USA (at its discretion).

I rightfully submit the above to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE PRINT NAME DATE

**PLEASE EMAIL ALL DOCUMENTS TO: [info@renewmdhealth.com](mailto:info@renewmdhealth.com)**