



**UNION AUTHORIZATION AND REPRESENTATION CARD  
UNDER THE NATIONAL LABOR RELATIONS ACT**

Name of Employer: Zuffa, LLC d/b/a Ultimate Fighting Championship

Job Classification: Professional Mixed Martial Artist

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

I designate Project Spearhead as my bargaining representative, and to represent me for all purposes under the National Labor Relations Act with regard to all conditions of my employment including, but not limited to; pay, benefits, and grievances.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_