## Request to Register an Official with other Combat Sport experience

## From Army BoxingAssociation

	DD	MM	YYYY
Applicant's Full name			
Previous physical contact sport (name of sport)			
Previous Club/Gyms			
Participation Level (tick all that apply): Amateur Profe	essional		
From To MM YY  No of bouts office	ciated		
Applicants Gender (tick appropriate box): Male Fem	ale		
Following your request to participate as an official for England Boxing, after having been involved in the above physical contact sport, please note the following conditions under which your membership will be accepted, if approved by England Boxing Ltd. The conditions are as follows;-			
<ul> <li>You must cease all involvement in the above sport</li> <li>You must not participate in any other Individual Physical Contac with us</li> </ul>	t Sport du	ıring your n	nembership
<ul> <li>You must abide by all England Boxing rules and guidelines, which Code of Conduct for England Boxing members and all AIBA rule provided on their website (www.aiba.org)</li> </ul>		•	• ,
<ul> <li>If you do not maintain a continuous annual registration with Eng following any break in membership using this process. In those reapply, including the requirement to serve another probation per National Competitions.</li> </ul>	circumstar	nces all co	nditions will
<ul> <li>AIBA will be informed of the request, however AIBA do not have requests. You must be aware that should AIBA query/reject you cause to suspend/close the membership</li> </ul>			
Applicant's Declaration I have read and understood the above information in relation to my app England Boxing Ltd. I confirm that the information I have supplied above and abide by the relevant conditions, should my application for member	e is accura	ate and tha	
Applicants Signature	Date		

Association Secretary Signature.....