

BOXING NEW ZEALAND INC

Level 2,
113 Adelaide Road
Wellington
New Zealand
1 February 2010

All Correspondence to
P O Box 24-148, Manners St
Wellington, NZ
Tel 04 389-0890
Fax 04 920-4220
email: exec@boxingnz.org.nz

APPENDIX 1

BOXER'S DECLARATION FOR NEW AND RENEWAL OF REGISTRATION OR LOST BOOK

Surname _____ Given Names _____

(as per Passport/Birth Certificate!)

Address (please advise ANY change of address) _____

Phone _____ Mobile _____ Email _____

Date of Birth _____ Weight _____ Male/Female. Local Association _____

PLEASE READ CAREFULLY AND CIRCLE THE APPROPRIATE RESPONSE

I declare that:-

+ I have lost my Boxer's Competition Record Book. YES/NO

+ I have had _____ previous bouts, Wins _____ Losses _____

PLEASE NOTE - this refers to experience in ANY country at ANY age.

(You are required to provide your previous AIBA Competition Record Book where possible).

+ I have had _____ kickboxing bouts Wins _____ Losses _____

+ Date of last kickboxing bout _____

(for kickboxing a stand down period of 3 months will apply, as per Annex A, Reg 13 (b))

+ Other contact sports/martial arts bouts Wins _____ Losses _____

+ Date of last competition _____

+ In the past month I have lost a bout through stoppage by the Referee. YES/NO

+ In the past month I have been *concussed* (ANYWHERE - eg: at home, at work, or in practising/playing any sport). YES/NO

+ In the past three months I have been *concussed* twice (ANYWHERE - eg: at home, at work, or in practising/playing any sport). YES/NO

+ In the past year I have been *concussed* three times (ANYWHERE - eg: at home, at work, or in practising/playing any sport). YES/NO

+ In the past three months I have competed in a *boxing/martial arts tournament or bout* held outside the jurisdiction of Boxing New Zealand. YES/NO

ALL QUESTIONS MUST BE ANSWERED!!!

+ Herewith a new/renewal/replacement (delete as applicable) Record Book, duly completed, (including history of previous bouts), checked and signed by the Association Secretary together with 2 current passport photographs (new books only) and an Association cheque for \$35.00, (or \$60.00 for urgent delivery within 7 days) (refer Annex C, Regulation 5).

I DECLARE THAT THE ABOVE IS TRUE AND CORRECT

Signature of Boxer _____

Name and signature of Coach _____ (Print Name) _____ (Signature)

NOTE: The Coach must be licenced by the NZBCA and a current financial member of the NZBCA.

Coach's Licence No: _____ Date of last renewal _____

Signature of Parent/Guardian _____ (attach Birth Certificate if applicant under 17 years)

Signature of Association Secretary _____ Date _____

TO BE COMPLETED BY OFFICE: Competition Record Book No _____ issued _____