

Sonny's International Masters Boxing Tournament 2018 (page 1 of 3)

Date: November 2, 2018 and November 3, 2018.

Location: Sonny's Boxing Gym, 108 E. Western Ave, Goodyear, AZ 85338

Held under the sanction of USA Boxing, Inc Phoenix LBC, Arizona U.S. participants must be a current member of USA Boxing in order to compete International participants must be a current member of a local AIBA boxing organization in order to compete. Deliberate falsification of entries may result in disqualification from this tournament.

FIRST NAME _____ LAST NAME _____

ADDRESS (Street/City/State/Province) _____

ZIP/POSTAL _____ E-MAIL (REQUIRED) _____

CELL PHONE # (Accessible at Event) _____

TOTAL AMATEUR BOUTS : (All bout history not just as a master) _____

NUMBER OF MASTER BOUTS: _____

OF THOSE BOUTS HOW MANY WERE IN THE LAST TEN YEARS _____

I CONFIRM I HAVE NEVER FOUGHT AS A PROFESSIONAL (initials required) _____

AGE (as of 12/31/18)

WEIGHT

DATE OF BIRTH

MALE

FEMALE

BOXING REGISTRATION NUMBER _____

LOCAL BOXING CLUB NAME/FEDERATION AFFILIATION _____

COACH'S NAME & COACH'S MOBILE # (Accessible during Event) _____

Entry Fee (USD): \$100.00 if received by Oct. 1, 2018. \$120.00 after. Make copy of registration for yourself and mail original. Make check or money order payable to Sonny's Boxing Gym.

Mail to: Sonny's Boxing Gym, 108 E. Western Ave, Goodyear, AZ 85338

Sonny's International Masters Boxing Tournament 2018 (page 2 of 3)

MASTERS NAME: _____

The number of bouts competed, which you listed on Page 1 of this Entry Form, must include all amateur bouts and all Master bouts.

Master Boxers must provide their own Master-Approved headgear. No other headgear is acceptable. Master-Approved gloves will be provided at the gloving table.

All US & International Master Boxers must be registered with a current passbook and written proof that all annual physical requirements have been satisfied (refer to USA Boxing Master Medical Requirements).

US Master Boxers must have a USA Boxing Yellow Passbook in order to compete. If you have not yet obtained your Obtaining a current US Masters passbook get started immediately. It must be done in advance of the tournament.

If you have questions about the Masters application/renewal process, please contact your local LBC Chairman.

We will confirm personal information (age, bout history, etc.) is accurate, prior to final brackets being created and posted. Age (as of (12/31/18)).

Matching Master boxers will be matched based on the following : 1. within 10 years of each other, and 2. with similar experience, and 3. within 10 pounds up to 201 pounds, no limit over 201 pounds.

Weigh-Ins & Physicals are required each morning a boxer competes. Boxer should report to Sonny's Boxing Gym.

I understand the above and will comply fully with Sonny's International Masters Boxing Tournament.

Master's Signature: _____

Date _____

Make copy of registration for yourself and mail in original. Make check or money order payable to Sonny's Boxing Gym and mail to: Sonny's Boxing Gym, 108 E. Western Ave, Goodyear, AZ 85338

Sonny's International Masters Boxing Tournament 2018 – Waiver (page 3 of 3)

I acknowledge that by signing this document I hereby freely agree to and make the following contractual representations, covenants and agreements to and for the benefit of Sonny's Boxing, United States Amateur Boxing (USA Boxing), any sanctioning local boxing committee of USA Boxing and all promoters, sponsors, and venue owner and their respective agents, officers, employees, members and affiliates, collectively releaseses.

I acknowledge that boxing is an inherently dangerous sport and fully realize the dangers of participating in boxing competition and preparing for the competition, and Fully assume the risks associated with such participation, the releaseses' own negligence and the possibility of serious physical and/ or mental trauma, injury, permanent paralysis or death associated with boxing competition. I certify that I have had no injuries to my hands, whether fractures, broken bones or otherwise, within three months preceding the dates of this entry form or Events, and have had no injuries to the head, concussion, headaches, fainting spells and should I experience of these inuries and conditions in the future I will immediately notify the officials of the Events and cease all participate in the Events. For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively, Successors) I hereby waive, release, discharge, hold harmless, and promise to indemnify and covenant not to sue the releaseses from any and all rights and claims including claims arising from the releases own negligence, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in or association with the Events, or travel to or return from the Events. I agree it is my sole responsibility to be familiar with the facilitates for the Events, the Releaseses' rules, and any special regulations for the Events. I understand and agree that situations may arise during the Events, which may be beyond the immediate control of Releaseses. I accept responsibility for the condition and adequacy of my competition equipment and physical condition. I assume all responsibility and liability for the selection of the equipment I use in the Events and with my ability and physical condition to participate in the Events. I understand that drug testing may be conducted for athletes registered for the Events and that the use of substances prohibited by Releaseses rules would make me subject to sanctions including, but not limited to, disqualification and suspension. I agree to be subject to drug testing if selected, and its sanctions if I fail to comply with the testing or am found positive for the use of a banned substance. I understand and agree that medical or other services rendered to me by or at the insistence of any of the Releaseses is not an admission of liability to provide or continue to provided such services and is not a waiver by any of Releaseses of any right or benefit hereunder. I agree, for myself and my Successors, that of this agreement, the asserting party shall be liable for the expenses (including legal fees) incurred by the Releaseses in defending. This agreement may not be modified orally and a waiver of any provision shall not be construed as a modification. My representations are contractually binding, and are not mere recitals, and that should I or my Successors assert any claim in contravention of any other provision herein or as a consent to any subsequent waiver or modification. Every term and provision of this agreement is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable. I grant full permission in perpetuity to Releaseses to use, re-use, publish and republish my name and likeness as a participant in the Events in any form without restriction or compensation. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization.

FEMALE BOXERS: I declare I am not pregnant. I understand the seriousness of this statement and accept full responsibility for it. In the case that this declaration is subsequently shown to be inaccurate or untrue and I suffer any related injury or damage during the competition, I, on behalf of myself, my heirs, executors and administrators, waive and release any and all claims for damages I may have against AIBA and/or USA Boxing (including its officials and employees), the organizers of the competition (including the Organizing Committee and/or Host Federation) and the competition venue owners for such injury or damage AND, I Have Read Appendix B: Declaration of Non-Pregnancy in USA Boxing's Medical Handbook & Medical Rules Handbook.

USA BOXING CODE OF CONDUCT: I confirm I am a member of United States Boxing (USA Boxing) or AIBA, and agree: I have previously read and familiarized myself with the USA Boxing Code of Conduct (Code); I must comply with the guidelines as set forth in the Code; the Code applies to all athlete and non-athlete members; my compliance with the Code is a requirement for participating in USA Boxing Events; I am required to abide by the Code of Conduct and all United States Olympic Committee policies, rules, and regulations. My signature below acknowledges that I understand the Code and accept the conditions outlined in it. I also agree to follow the USA Boxing Grievance Procedures if I am charged with violation(s) of the Code.

This authorization is continuous and may only be withdrawn by my specific rescission of this authorization.

Master's Full Name (Please Print) _____ Date _____

Master's Signature _____

Make copy of registration for yourself and mail in original. Make check or money order payable to Sonny's Boxing Gym and mail to: Sonny's Boxing Gym, 108 E. Western Ave, Goodyear, AZ 85338