

BOXING ENTRY FORM
THE MAX FITNESS CENTER SATURDAY NIGHT SHOWDOWN
Registration Deadline - JANUARY 10TH, 2017
Event – JANUARY 21ST, 2017
NON-SANCTIONED

Please print or type all information:

Name: _____
Address: _____ (City) _____ (State) _____ (Zip) _____
Telephone.: _____ - _____ - _____ Date of Birth: ____/____/____ Age: ____ Enter me in (wt): _____ division
Male _____ Female _____ Number of Bouts you have competed in: _____

Class: (Circle one) Beginner Intermediate Advanced

The Max Fitness Center Saturday Night Showdown Amature Boxing Events
(BOXING CODE OF CONDUCT)

I understand that my compliance with the Code is a requirement for my participation in The Max Fitness Center Saturday Night Showdown Amature Boxing Events. I recognize that my participation in this event is an honor. I also recognize that this Code does not establish a complete set of rules that prescribes every aspect of appropriate behavior. Further, I:

1. Will recognize, respect and adhere to the authority of appointed leaders.
2. Will comply with The Max Fitness Center Saturday Night Showdown Amature Boxing Events uniform requirements
3. Will abide by the policies and rules established by The Max Fitness Center Saturday Night Showdown Amature Boxing Events; refrain from illegal or inappropriate behavior that would detract from a positive image of myself and The Max Fitness Center Saturday Night Showdown Amature Boxing Events
4. Will respect others as well as their property, including but not limited to competitors, officials and spectators
5. Will not engage in, nor tolerate, any form of verbal, physical or sexual abuse

Disciplinary Procedures :

Failure to comply with the Code of Conduct set forth in this document by The Max Fitness Center Saturday Night Showdown Amature Boxing Events may result in disciplinary action in accordance with the penalties outlined in this agreement.

Penalties could include:

Immediate dismissal, suspension and /or termination from The Max Fitness Center Saturday Night Showdown Amature Boxing Events

Acceptance

I pledge to uphold the this Code, which offers a general guide to my conduct as a participant in a The Max Fitness Center Saturday Night Showdown Amature Boxing Event. I have familiarized myself with the Code and understand that my acceptance of it, as signified by my signature below, is a condition of my entry acceptance into The Max Fitness Center Saturday Night Showdown Amature Boxing Event.

Participant Name (Printed)

Participant Name (Signature)

Date

(OFFICIAL USE ONLY) ACCEPTED _____ DENIED _____ Date _____ Received by: _____