COMPETITIVE BOXING SQUAD 2021

IBC AMATEUR BOXING SECTION:

Please complete all the fields below in legible handwriting and mark one character per square, letters in CAPTIALS.

First Name:

Surname:

Date of Birth:

Please Circle

Male - Female **Senior - Junior (U16)**

Address:

Postcode: **Telephone:**

Emergency Contact Number: **(Must be supplied)**

Email:

ISLINGTON BOXING CLUB – COMPETITIVE BOXING SQUAD 2021

Does the proposed associated member have any serious medical conditions that may affect him/her in participating in boxing training?

Yes / No If yes, please supply details.

I have read and fully understand the rules and regulations of Islington Boxing Club (IBC) that are posted in the club premises and agree to abide by them at all times. I know that failure to do so could result in my registration being cancelled and may lead to a permanent ban at IBC and Islington Community Sports Academy. My signature appears below to clarify this statement. I am also aware that my registration makes me only an associated member of IBC with no voting rights.

- As in any other sport in which contact occurs, there can be a risk of injury to the participants. You can be assured that every precaution is taken by the club/coaches to minimise these risks, but you must understand it can happen and is unavoidable, as it is part of the contact that the sport offers. By signing this form, you agree that any injury that occurs due to the nature of the contact sport is entirely at your/their own risk.
- I agree that any photography/filming produced by the club or an agreed third party which has been approved by the management of Islington Boxing Club and can be used by IBC/Islington Community Sports Academy or by those given permission by us for any PR/Media or Social Media content to promote this club's activities.
- I understand that under **NO** circumstances will there be any refunds on membership fees or pre booked sessions.
- I understand that membership to the club is for a *calendar* year only regardless of first date of registration and is due for renewal in January 2022.
- As a 'Carded' Amateur Boxer registered at Islington Boxing Club, I understand that if I do wish to transfer to another club that any outstanding fees owed to IBC are paid in full before management are able to approve a requested transfer to another amateur boxing club that is affiliated to England Boxing.
- I agree to the club being able to use my personal details for their own use only and agree to possible mailshots/information that the club may need to send to their users, members and supporters. This information will be stored under Data Protection rules and not shared with third parties. I understand that the club may need to use my details for reasons of health and safety, I give my consent to this.

Signed **Date**

If applicant is Under 17 this section to be completed by Parent/Guardian

If signing for a person under the age of 17, I as the Parent/Guardian, give permission for my child to participate in Competitive Amateur Boxing and is fit to do so in my opinion. If my child partakes in contact boxing it is done completely at his/her own risk. I am aware and accept the England Boxing Child Protection Policy. A Copy of this is displayed around the club building.

Signed **Date**

Parent/Guardian of applicant (if under 17 years old)