



## **JUNIOR, BANTAM & INTERMEDIATE ATHLETE “MUST HAVE” ITEMS**

### **1. USA BOXING COMPETITION PASSBOOK**

IF YOU DO NOT HAVE YOUR PASSBOOK AT REGISTRATION YOU WILL NOT BE ENTERED INTO THE TOURNAMENT DRAW!!

### **2. PROOF OF U.S. CITIZENSHIP**

A COPY OR PICTURE OF YOUR ORIGINAL BIRTH CERTIFICATE OR GOVERNMENT ISSUED U.S. PASSPORT WILL BE ACCEPTED.

### **3. BOXING EQUIPMENT**

USA BOXING APPROVED HEADGEAR, MOUTHGUARD (NO RED), UNIFORMS, BOXING BOOTS

### **4. CURANT USA BOXING MEDICAL CERTIFICATE (FIT TO BOX)**

### **5. ALL ATHLETES MUST PRE-REGISTER AND PRE-WEIGH IN ON TUESDAY APRIL 3<sup>rd</sup> (see below for weigh stations)**

1. Stockton PYA Boxing Club 424 East Ninth Street, Stockton CA. 95206 Steve 209 817-2182 from 5:pm to 7:30 pm

2. Caballero Boxing Club 35 Quinta Court, Sacramento CA. 95823 Marcus 916 583-0955 from 5:pm to 7:30pm

3. San Jose PAL 680 South 34<sup>th</sup> Street, San Jose CA. 95116 Candy 408 806-2455 from 5:30pm to 7:30pm

4. Physique Magnifique 387 Grand Ave, South San Francisco CA. 94080 Miguel 415 990-0890 from 5:pm to 7:30pm

5. Kings Boxing Gym 843 35<sup>th</sup> Ave. Oakland CA. 94601 Robert 510 381-2103 from 5:pm to 7:30pm

**ALL PAPERWORK MUST BE TURNED INTO YOUR REGION REPRESENTATIVE AT THE WEIGH STATION ON APRIL 3<sup>rd</sup>**

Junior boxers must be 15 or 16 years of age, determined by year of birth.

- ☐ Junior boxers must have been born in the years **2002 or 2003**.

Intermediate boxers must be 13 or 14 years of age, determined by year of birth.

- ☐ Intermediate boxers must have been born in the years **2004 or 2005**.

Bantam boxers must be 11 or 12 years of age, determined by year of birth.

- ☐ Bantam boxers must have been born in the years **2006 or 2007**.

Pee Wee 9-10 boxers must be 9 or 10 years of age, as determined by year of birth:

- ☐ Pee Wee 9-10 boxers must have been born between **January 1, 2008 and March 4, 2009**.

Pee Wee 8 boxers must be 8 years of age on or before March 4, 2018:




- ☐ Pee Wee 8 boxers must have been born between **March 5, 2009 and March 4, 2010**.

### JUNIOR, INTERMEDIATE, BANTAM & PEE WEE WEIGHT CLASSES

Weight Class	Junior	Intermediate	Bantam	Pee Wee
				50 lbs
				55 lbs
			60 lbs	60 lbs
			65 lbs	65 lbs
		70 lbs	70 lbs	70 lbs
		75 lbs	75 lbs	75 lbs
		80 lbs	80 lbs	80 lbs
		85 lbs	85 lbs	85 lbs
	90 lbs (USA only)	90 lbs	90 lbs	90 lbs
	95 lbs (USA only)	95 lbs	95 lbs	95 lbs
Pinweight	46 kg/101 lbs	101 lbs	101 lbs	101 lbs
Light Flyweight	48 kg/106 lbs	106 lbs	106 lbs	106 lbs
Flyweight	50 kg/110 lbs	110 lbs	110 lbs	110 lbs
Light Bantamweight	52 kg/114 lbs	114 lbs	114 lbs	114 lbs
Bantamweight	54 kg/119 lbs	119 lbs	119 lbs	119 lbs
Featherweight	57 kg/125 lbs	125 lbs	125 lbs	125 lbs
Lightweight	60 kg/132 lbs	132 lbs	132 lbs	as needed
Light Welterweight	63 kg/138 lbs	138 lbs	138 lbs	
Welterweight	66 kg/145 lbs	145 lbs	145 lbs	
Light Middleweight	70 kg/154 lbs	154 lbs	as needed	
Middleweight	75 kg/165 lbs	165 lbs		
Light Heavyweight	80 kg/176 lbs	176 lbs		
Heavyweight	80+ kg/176+ lbs	176+ lbs		

<b>Number Rounds/Duration:</b>	Junior:	Three, 2 minute rounds.
	Intermediate:	Three, 1½ minute rounds.
	Bantam & Pee Wee:	Three, 1 minute rounds.
	Pee Wee:	Three, 1 minute rounds.

### MINIMUM BOUT EXPERIENCE REQUIREMENTS

Elite Male	Elite Female	Youth	Junior	Inter- mediate	Bantam	Pee Wee	Pee Wee Novice
			5	5	5	5	0

2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS  
OFFICIAL ATHLETE ENTRY FORM

LBC Tournament Sanctioned by USA Boxing:

REGIONAL Tournament Sanctioned by USA Boxing:

Association, Inc.

NATIONAL Tournament Sanctioned by USA Boxing: **USA BOXING NATIONAL OFFICE**

Association, Inc.

PLEASE CHECK APPROPRIATE BOX: ☐ MALE ☐ FEMALE

NAME: Weight Class: Age: (determined by year of birth)

LBC: Region Name & No.: Birth Date:

Number of Bouts #

Address: Passbook Validation:  
Street City State/Zip (2018)

Phone #: Cell Phone #: Fax: Email Address:

Personal Coach Name & Phone: Your Personal Boxing Club:

Do you wear Dental Braces? Yes ☐ No ☐ If yes you must comply with Article 2, 102.6 (g) USA Boxing, Inc. rules.

WAIVER/WARNING

IN CONSIDERATION OF YOUR ACCEPTING THIS ENTRY, I HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS ADMINISTRATORS AND ASSIGNS WAIVE AND RELEASE ANY AND ALL RIGHTS TO ANY CLAIM FOR DAMAGES I MAY OR MIGHT HAVE AGAINST UNITED STATES AMATEUR BOXING (USA BOXING), ANY SANCTIONING LOCAL BOXING COMMITTEE OF USA BOXING AND ALL SPONSORS AND VENUE OWNERS, OR THE OFFICERS, SUB-COMMITTEES AGENTS, REPRESENTATIVES AND ASSIGNS OF THESE ENTITIES, FOR ANY INJURY OR DAMAGE SUFFERED BY ME DURING MY PARTICIPATION IN, AND/OR ARISING FROM TRAVELING TO AND/OR RETURNING FROM THE BELOW LISTED TOURNAMENTS.

The USA Boxing Local Championship Tournament at: **Fire in the Ring Boxing Club, 180 Industrial Way, Brisbane CA. 94005**  
Date: **April 7<sup>th</sup>-8<sup>th</sup>**

The United States Amateur Boxing Regional Tournament at: **San Jose PAL 680 South 34<sup>th</sup>, San Jose CA. 95116**  
Date: **May 5<sup>th</sup>**

The United States Amateur Boxing National Tournament at: **Charleston West Virginia** Date: **June 24<sup>th</sup> – 30<sup>th</sup>**

AGREE TO ABIDE BY THE RULES OF UNITED STATES AMATEUR BOXING. I FULLY UNDERSTAND THAT I ASSUME ALL RESPONSIBILITY FOR ANY INJURY OR DAMAGE THAT I MAY INCUR IN THESE BOXING BOUTS. I UNDERSTAND AND AGREE THAT MEDICAL OR OTHER SERVICES RENDERED TO ME BY OR AT THE INSISTANCE OF ANY OF THE NAMED PARTIES IS NOT AN ADMISSION OF LIABILITY TO PROVIDE OR CONTINUE TO PROVIDE ANY SERVICES AND IS NOT A WAIVER BY ANY OF SAID PARTIES OF ANY RIGHT OR RIGHTS HEREUNDER.

I CERTIFY THAT I HAVE HAD NO INJURIES TO MY HANDS, NEITHER FRACTURES NOR BROKEN BONES, WITHIN THREE MONTHS PRECEDING THE DATES OF THIS ENTRY FORM, AND KNOW OF NO OTHER INJURIES TO THE HEAD, CONCUSSION, FAINTING SPELLS, AND WILL NOTIFY BOXING OFFICIALS IMMEDIATELY SHOULD ANY OF THESE INJURIES AND CONDITIONS BE EXPERIENCED IN THE FUTURE.

IN ADDITION, I ALSO UNDERSTAND AND APPRECIATE THAT PARTICIPATION IN THE SPORT OF BOXING CARRIES A RISK TO ME OF SERIOUS INJURY, INCLUDING PERMANENT PARALYSIS OR DEATH; I VOLUNTARILY AND KNOWINGLY RECOGNIZE, ACCEPT AND ASSUME THIS RISK.

Signed: Date:

Participant's Full Name

Signed: Date:

Parent(s) or Guardian(s)

REQUIRED FOR ALL PARTICIPANTS

# MEDICAL TREATMENT FORM



TO: 2018 USA Boxing National Junior Olympic Championships Participants

FROM: USA Boxing Events Department

SUBJECT: Medical Treatment Form

United States Amateur Boxing's insurance company requires a signed medical treatment form either authorizing emergency medical treatment or not authorizing medical treatment for all participating individuals. ***Participants under 18 years of age, are required to have parental / guardian signatures as well.***

Please complete and sign the attached form. Be sure to indicate whether treatment is approved or not approved.

Thank you for your assistance with this matter. Please do not hesitate to contact the Events Department at USA Boxing Headquarters at (719) 866-2307 if you have any questions.

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## MEDICAL TREATMENT FORM

\_\_\_\_\_ I **AUTHORIZE** a duly appointed representative of United States Amateur Boxing, Inc., to consent to emergency medical treatment during my participation in USA Boxing's sanctioned event.

\_\_\_\_\_ I **DECLINE** to authorize consent for emergency medical treatment during my participation in USA Boxing's sanctioned event for the following reasons:

If you marked DECLINE, please mark one of the following:

\_\_\_\_\_ Religious

\_\_\_\_\_ Personal

\_\_\_\_\_ Other: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Athlete Signature)

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Parent/Guardian Signature for athletes under 18 yrs.)

Date: \_\_\_\_\_



**USA Boxing, Inc.**  
**2017 USA Boxing Junior Olympic National Championships**

**Release to Compete with Braces**

USA Boxing Rule 102.6 (4) (g) Boxers who wish to compete with braces are required to have attached to their passbooks a completed Release To Compete With Braces form. This form requires the written approval of their dentist, parents and/or guardian (if under 18 years of age) and a dentist-molded mouthpiece. This includes upper and/or lower braces. Boxers competing with braces waive the right to dental coverage under the USA Boxing insurance program.

I understand the above rule and give my permission for \_\_\_\_\_ to  
compete in amateur boxing. (Boxer's name)

Dentist Approval:

_____ Print Name	_____ Signature
_____ Date	_____ State License Number

Parent or Legal Guardian Approval (if boxer is a minor):

_____ Print Name	_____ Signature	_____ Date
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Athlete:

_____ Print Name	_____ Signature	_____ Date
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## DECLARATION OF NON PREGNANCY FOR GIRLS BOXERS AGED UNDER 18 (EIGHTEEN)

Date:

Place:

Name of Competition:

I, \_\_\_\_\_, am one of the parents / legal caretaker of, \_\_\_\_\_

(insert name of the Boxer) and declare, on her behalf, that she is 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 \_\_\_\_\_,

(insert name of the Boxer) suffers any related injury or damage during the competition,

I on behalf of \_\_\_\_\_, (insert name of the Boxer), her heirs, executors and administrators, waive and release any and all claims for damages she may have against USA Boxing (including its officials and employees), the organizers of the competition (including the Organizing Committee and the Host Federation) and the Competition Venue owners for such injury or damage.

Signature of one of the Parents / Legal Caretaker

\_\_\_\_\_

Acknowledged by

\_\_\_\_\_

[Signature of the Boxer]

## **NON-ATHLETE** ENTRY FORM

Name of Competition: **2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS**

Name:

LBC#:

Region#:

Address:

*Street*

*City*

*State*

*Zip*

Phone #:

Validation #:

Date of Birth:

(2018)

Check one: Official: ☐ Coach: ☐ Other: ☐ (If other, what capacity)

**Coaches and officials please list current level:**

### **WAIVER AND RELEASE AND ASSUMPTION OF RISK**

IN CONSIDERATION OF ME BEING ALLOWED TO PARTICIPATE IN A NON-ATHLETE CAPACITY, AND ACCEPTANCE OF THIS ENTRY FORM IN A UNITED STATES AMATEUR BOXING COMPETITION, I AGREE:

1. I understand the nature of United States Amateur Boxing, Inc. activities and my experience and capabilities and believe I am qualified to participate in such activity. I further acknowledge that I am aware the activity will be conducted in facilities open to the public during the activity. I further agree and warrant that if I believe conditions to be unsafe, I will immediately discontinue further participation in the activity.
2. **I FULLY UNDERSTAND** that: (a) United States Amateur Boxing, Inc. activities involve risks and dangers of **SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH** ("Risks"); (b) these Risks and dangers may be caused by me or the actions or inactions of others participating in the activity, the condition in which the activity takes place, or **THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW**; (c) there may be other risks and social and economic losses either known to me or not readily foreseeable at this time; and I **FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred as a result of my participation in these activities.
3. **I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS** the United States Amateur Boxing, Inc., its clubs and LBC's, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activities take place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, or anyone on my behalf makes a claim against any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

Participant Name (Print)

Date

Participant Name (Signature)

Date

Rev.03/03/18

**FORM MUST BE FILLED OUT IN ITS ENTIRETY**



## **Athlete/Non-Athlete Code of Conduct**

### **Outlined below is the USA Boxing Code of Conduct**

*I understand that my compliance with the Code is a requirement for my participation in USA Boxing events. I recognize that my participation in this event is an honor and privilege. 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 act in a manner consistent with the spirit of fair play and responsible conduct;
2. Will recognize, respect and adhere to the authority of USA Boxing's appointed coaches and team leaders;
3. Will attend all team functions, to include meetings, practices, press conferences, competitions, etc. unless excused or otherwise instructed by the team leader or USA Boxing's designee;
4. Will comply with USA Boxing and the United States Olympic Committee (USOC) uniform requirements;
5. Will be within 5% pounds of my competition weight prior to competition or 8% pounds within my competition weight for a training camp 30 days out from competition;
6. Will adhere to all curfews established by the team leader or USA Boxing's designee;
7. Will maintain an appropriate level of fitness to promote optimal athletic performance;
8. Will make every effort to perform to the best of my abilities;
9. Will refrain from the use of performance-limiting drugs, including, but not limited to, tobacco and alcohol;
10. Will refrain from using any substance on the Olympic Movement Anti-Doping Code or Association Internationale de Boxe Amateur (AIBA) banned substance list, as enforced by WADA and USADA, and will abide by the drug testing procedures of USADA, WADA, and the USOC;
11. Will abide by the policies and rules established by USA Boxing, the USOC and the Association International De Boxe Amateur (AIBA);
12. Will respect others, including my teammates, coaches, competitors, officials and spectators;
13. Will not engage in, nor tolerate, any form of verbal, physical or sexual abuse;
14. Will respect the property of others;
15. Will refrain from profanity and derogatory language that would reflect negatively on myself and USA Boxing;
16. Will refrain from illegal or inappropriate behavior that would detract from a positive image of myself and USA Boxing;
17. Will refrain from engaging in any behavior that could detract from my ability, or my teammates' ability, to perform optimally;
18. Will maintain a positive attitude and act in a way that will bring honor to myself, the team, USA Boxing and the United States of America;
19. Will limit socialization with members of the opposite sex to public areas, exceptions being immediate family members, members of the USA delegation and/or other times as approved by the team leader;
20. Will remember that I am an ambassador for USA Boxing, my country and the Olympic movement; and
21. Will cooperate with USA Boxing's grievance process and Judicial Committee requests.

Any member present during any violation of the Code of Conduct should leave the area immediately or be considered a participant by choice.

### ***Disciplinary Procedures and Penalties***

*Failure to comply with the Code of Conduct set forth in this document for USA Boxing may result in disciplinary action in accordance with the penalties outlined in this agreement.*

*Penalties could include:*

1. *Temporary or permanent termination of USA Boxing membership.*
2. *Suspension from USA Boxing activities for a specified period.*
3. *For National Team members:*
  - a. *Immediate dismissal from team and return home at athlete's expense.*
  - b. *Withholding of a portion or all of any stipend(s) received from USA Boxing, USOC, etc.*

*Following any disciplinary action by USA Boxing, the disciplined member has a right to a hearing by the Judicial Committee, if requested in writing with the statute of limitations, and submitted with the filing fee.*

*Any appeal taken for disciplinary action rendered in an emergency hearing shall be to USA Boxing's CEO and will be conducted in accordance with Article XIV, Section 214.12 of USA Boxing's Constitution and By-laws.*

### **Acceptance**

I pledge to uphold the spirit of this Code, which offers a general guide to my conduct as a participant in a USA Boxing event. I agree to follow the USA Boxing Grievance Procedures if I am charged with violation of the Code. 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 membership in this USA Boxing event.

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Participant Name (*Printed*)

Date

---

Participant Name (*Signature*)

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2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS

Name of Event

---

Witness



## PEE WEE ATHLETES “MUST HAVE” ITEMS

### 1. USA BOXING COMPETITION PASSBOOK

IF YOU DO NOT HAVE YOUR PASSBOOK AT REGISTRATION YOU WILL NOT BE ENTERED INTO THE TOURNAMENT DRAW!!

### 2. BOXING EXQUIPMENT

USA BOXING APPROVED HEADGEAR, MOUTHGUARD (NO RED), UNIFORMS, BOXING BOOTS

### 3. CURANT USA BOXING MEDICAL CERTIFICATE (FIT TO BOX)

### 4. PEE’S CAN BOX AT LOCAL LEVEL. (not regional) WIN OR LOSE THEY STILL QUALIFY FOR NATIONALS

### 5. ALL ATHLETES MUST PRE-REGISTER AND PRE-WEIGH IN ON TUESDAY APRIL 3<sup>rd</sup> (see below for weigh stations)

1. Stockton PYA Boxing club 424 East Ninth Street, Stockton CA. 95206 Steve 209 817-2182 from 5:pm to 7:30 pm
2. Caballero Boxing Gym 35 Quinta Court, Sacramento CA. 95823 Marcus 916 583-0955 from 5:pm to 7:30 pm
3. San Jose PAL 680 South 34<sup>th</sup> Street, San Jose CA. 95116 Candy 408 806-2455 from 5:30 pm to 7:30 PM
4. Physique Magnifique 387 Grand Ave. South San Francisco CA. 94080 Miguel 415 990-0890 from 5:pm to 7:30 pm
5. Kings Boxing Gym 843 35<sup>th</sup> Ave, Oakland CA. 94601 Robert 510 381-2103 from 5:pm to 7:30 pm

ALL PAPERWORK MUST BE TURNED INTO YOUR REGION REPRESENTATIVE AT THE WEIGH STATION ON ARIL 3rd





9-10-year-old as determined by year of birth

8-year-old must be born between March 5<sup>th</sup>, 2009 and March 4<sup>th</sup>, 2010

**2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS  
OFFICIAL ATHLETE ENTRY FORM**

LBC Tournament Sanctioned by USA Boxing: \_\_\_\_\_ Association, Inc.

REGIONAL Tournament Sanctioned by USA Boxing: \_\_\_\_\_ Association, Inc.

NATIONAL Tournament Sanctioned by USA Boxing: **USA BOXING NATIONAL OFFICE** Association, Inc.

PLEASE CHECK APPROPRIATE BOX: ☐ ☐ MALE ☐ FEMALE

NAME: \_\_\_\_\_ Weight Class: \_\_\_\_\_ Age: \_\_\_\_\_ (Determined by year of birth, **see above**)

LBC: \_\_\_\_\_ Region Name & No.: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Number of bouts# \_\_\_\_\_

Address: \_\_\_\_\_ Passbook Validation: \_\_\_\_\_  
                     Street                      City                      State/Zip                      (2018)

Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Personal Coach Name & Phone: \_\_\_\_\_ Your Personal Boxing Club: \_\_\_\_\_

Do you wear Dental Braces? Yes ☐ No ☐ If yes you must comply with Article 2, 102.6 (g) USA Boxing, Inc. rules.

**WAIVER/WARNING**

IN CONSIDERATION OF YOUR ACCEPTING THIS ENTRY, I HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS ADMINISTRATORS AND ASSIGNS WAIVE AND RELEASE ANY AND ALL RIGHTS TO ANY CLAIM FOR DAMAGES I MAY OR MIGHT HAVE AGAINST UNITED STATES AMATEUR BOXING (USA BOXING), ANY SANCTIONING LOCAL BOXING COMMITTEE OF USA BOXING AND ALL SPONSORS AND VENUE OWNERS, OR THE OFFICERS, SUB-COMMITTEES AGENTS, REPRESENTATIVES AND ASSIGNS OF THESE ENTITIES, FOR ANY INJURY OR DAMAGE SUFFERED BY ME DURING MY PARTICIPATION IN, AND/OR ARISING FROM TRAVELING TO AND/OR RETURNING FROM THE BELOW LISTED TOURNAMENTS.

The USA Boxing Local Championship Tournament at: **Fire in the Ring Boxing Club, 180 Industrial Way, Brisbane CA. 94005** Date: **April 7<sup>th</sup>-8<sup>th</sup>**

The United States Amateur Boxing Regional Tournament at: \_\_\_\_\_ Date: \_\_\_\_\_

The United States Amateur Boxing National Tournament at: **Charleston West Virginia** Date: **June 24<sup>th</sup> – 30<sup>th</sup>**

AGREE TO ABIDE BY THE RULES OF UNITED STATES AMATEUR BOXING. I FULLY UNDERSTAND THAT I ASSUME ALL RESPONSIBILITY FOR ANY INJURY OR DAMAGE THAT I MAY INCUR IN THESE BOXING BOUTS. I UNDERSTAND AND AGREE THAT MEDICAL OR OTHER SERVICES RENDERED TO ME BY OR AT THE INSISTANCE OF ANY OF THE NAMED PARTIES IS NOT AN ADMISSION OF LIABILITY TO PROVIDE OR CONTINUE TO PROVIDE ANY SERVICES AND IS NOT A WAIVER BY ANY OF SAID PARTIES OF ANY RIGHT OR RIGHTS HEREUNDER.

I CERTIFY THAT I HAVE HAD NO INJURIES TO MY HANDS, NEITHER FRACTURES NOR BROKEN BONES, WITHIN THREE MONTHS PRECEDING THE DATES OF THIS ENTRY FORM, AND KNOW OF NO OTHER INJURIES TO THE HEAD, CONCUSSION, FAINTING SPELLS, AND WILL NOTIFY BOXING OFFICIALS IMMEDIATELY SHOULD ANY OF THESE INJURIES AND CONDITIONS BE EXPERIENCED IN THE FUTURE.

IN ADDITION, I ALSO UNDERSTAND AND APPRECIATE THAT PARTICIPATION IN THE SPORT OF BOXING CARRIES A RISK TO ME OF SERIOUS INJURY, INCLUDING PERMANENT PARALYSIS OR DEATH; I VOLUNTARILY AND KNOWINGLY RECOGNIZE, ACCEPT AND ASSUME THIS RISK.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Participant's Full Name*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Parent(s) or Guardian(s)*

REQUIRED FOR ALL PARTICIPANTS



# MEDICAL TREATMENT FORM



TO: 2018 USA Boxing National Junior Olympic Championships Participants

FROM: USA Boxing Events Department

SUBJECT: Medical Treatment Form

United States Amateur Boxing's insurance company requires a signed medical treatment form either authorizing emergency medical treatment or not authorizing medical treatment for all participating individuals. ***Participants under 18 years of age, are required to have parental / guardian signatures as well.***

Please complete and sign the attached form. Be sure to indicate whether treatment is approved or not approved.

Thank you for your assistance with this matter. Please do not hesitate to contact the Events Department at USA Boxing Headquarters at (719) 866-2307 if you have any questions.

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## MEDICAL TREATMENT FORM

\_\_\_\_\_ I **AUTHORIZE** a duly appointed representative of United States Amateur Boxing, Inc., to consent to emergency medical treatment during my participation in USA Boxing's sanctioned event.

\_\_\_\_\_ I **DECLINE** to authorize consent for emergency medical treatment during my participation in USA Boxing's sanctioned event for the following reasons:

If you marked DECLINE, please mark one of the following:

\_\_\_\_\_ Religious

\_\_\_\_\_ Personal

\_\_\_\_\_ Other: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Athlete Signature)

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
(Parent/Guardian Signature for athletes under 18 yrs.)

Date: \_\_\_\_\_





**USA Boxing, Inc.**  
**2018 USA Boxing Junior Olympic National Championships**

**Release to Compete with Braces**

USA Boxing Rule 102.6 (4) (g) Boxers who wish to compete with braces are required to have attached to their passbooks a completed Release To Compete With Braces form. This form requires the written approval of their dentist, parents and/or guardian (if under 18 years of age) and a dentist-molded mouthpiece. This includes upper and/or lower braces. Boxers competing with braces waive the right to dental coverage under the USA Boxing insurance program.

I understand the above rule and give my permission for \_\_\_\_\_ to  
compete in amateur boxing. (Boxer's name)

Dentist Approval:

_____ Print Name	_____ Signature
_____ Date	_____ State License Number

Parent or Legal Guardian Approval (if boxer is a minor):

_____ Print Name	_____ Signature	_____ Date
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Athlete:

_____ Print Name	_____ Signature	_____ Date
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✱

## DECLARATION OF NON PREGNANCY FOR GIRLS BOXERS AGED UNDER 18 (EIGHTEEN)

Date:

Place:

Name of Competition:

I, \_\_\_\_\_, am one of the parents / legal caretaker of, \_\_\_\_\_

(insert name of the Boxer) and declare, on her behalf, that she is 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 \_\_\_\_\_,

(insert name of the Boxer) suffers any related injury or damage during the competition,

I on behalf of \_\_\_\_\_, (insert name of the Boxer), her heirs, executors and administrators, waive and release any and all claims for damages she may have against USA Boxing (including its officials and employees), the organizers of the competition (including the Organizing Committee and the Host Federation) and the Competition Venue owners for such injury or damage.

Signature of one of the Parents / Legal Caretaker

\_\_\_\_\_

Acknowledged by

\_\_\_\_\_

[Signature of the Boxer]



## **NON-ATHLETE** ENTRY FORM

Name of Competition: **2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS**

Name:

LBC#:

Region#:

Address:

*Street*

*City*

*State*

*Zip*

Phone #:

Validation #:

Date of Birth:

(2018)

Check one: Official: ☐ Coach: ☐ Other: ☐ (If other, what capacity)

**Coaches and officials please list current level:**

### **WAIVER AND RELEASE AND ASSUMPTION OF RISK**

IN CONSIDERATION OF ME BEING ALLOWED TO PARTICIPATE IN A NON-ATHLETE CAPACITY, AND ACCEPTANCE OF THIS ENTRY FORM IN A UNITED STATES AMATEUR BOXING COMPETITION, I AGREE:

1. I understand the nature of United States Amateur Boxing, Inc. activities and my experience and capabilities and believe I am qualified to participate in such activity. I further acknowledge that I am aware the activity will be conducted in facilities open to the public during the activity. I further agree and warrant that if I believe conditions to be unsafe, I will immediately discontinue further participation in the activity.
2. **I FULLY UNDERSTAND** that: (a) United States Amateur Boxing, Inc. activities involve risks and dangers of **SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH** ("Risks"); (b) these Risks and dangers may be caused by me or the actions or inactions of others participating in the activity, the condition in which the activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be other risks and social and economic losses either known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES incurred as a result of my participation in these activities.
3. **I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS** the United States Amateur Boxing, Inc., its clubs and LBC's, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activities take place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, or anyone on my behalf makes a claim against any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

Participant Name (Print)

Date

Participant Name (Signature)

Date

Rev.03/03/18

**FORM MUST BE FILLED OUT IN ITS ENTIRETY**



## **Athlete/Non-Athlete Code of Conduct**

### **Outlined below is the USA Boxing Code of Conduct**

*I understand that my compliance with the Code is a requirement for my participation in USA Boxing events. I recognize that my participation in this event is an honor and privilege. I also recognize that this Code does not establish a complete set of rules that prescribes every aspect of appropriate behavior. Further, I:*

22. Will act in a manner consistent with the spirit of fair play and responsible conduct;
23. Will recognize, respect and adhere to the authority of USA Boxing's appointed coaches and team leaders;
24. Will attend all team functions, to include meetings, practices, press conferences, competitions, etc. unless excused or otherwise instructed by the team leader or USA Boxing's designee;
25. Will comply with USA Boxing and the United States Olympic Committee (USOC) uniform requirements;
26. Will be within 5% pounds of my competition weight prior to competition or 8% pounds within my competition weight for a training camp 30 day out from competition;
27. Will adhere to all curfews established by the team leader or USA Boxing's designee;
28. Will maintain an appropriate level of fitness to promote optimal athletic performance;
29. Will make every effort to perform to the best of my abilities;
30. Will refrain from the use of performance-limiting drugs, including, but not limited to, tobacco and alcohol;
31. Will refrain from using any substance on the Olympic Movement Anti-Doping Code or Association Internationale de Boxe Amateur (AIBA) banned substance list, as enforced by WADA and USADA, and will abide by the drug testing procedures of USADA, WADA, and the USOC;
32. Will abide by the policies and rules established by USA Boxing, the USOC and the Association International De Boxe Amateur (AIBA);
33. Will respect others, including my teammates, coaches, competitors, officials and spectators;
34. Will not engage in, nor tolerate, any form of verbal, physical or sexual abuse;
35. Will respect the property of others;
36. Will refrain from profanity and derogatory language that would reflect negatively on myself and USA Boxing;
37. Will refrain from illegal or inappropriate behavior that would detract from a positive image of myself and USA Boxing;
38. Will refrain from engaging in any behavior that could detract from my ability, or my teammates' ability, to perform optimally;
39. Will maintain a positive attitude and act in a way that will bring honor to myself, the team, USA Boxing and the United States of America;
40. Will limit socialization with members of the opposite sex to public areas, exceptions being immediate family members, members of the USA delegation and/or other times as approved by the team leader;
41. Will remember that I am an ambassador for USA Boxing, my country and the Olympic movement; and
42. Will cooperate with USA Boxing's grievance process and Judicial Committee requests.



Any member present during any violation of the Code of Conduct should leave the area immediately or be considered a participant by choice.

### ***Disciplinary Procedures and Penalties***

*Failure to comply with the Code of Conduct set forth in this document for USA Boxing may result in disciplinary action in accordance with the penalties outlined in this agreement.*

*Penalties could include:*

5. *Temporary or permanent termination of USA Boxing membership.*
6. *Suspension from USA Boxing activities for a specified period.*
7. *For National Team members:*
  - a. *Immediate dismissal from team and return home at athlete's expense.*
  - b. *Withholding of a portion or all of any stipend(s) received from USA Boxing, USOC, etc.*

*Following any disciplinary action by USA Boxing, the disciplined member has a right to a hearing by the Judicial Committee, if requested in writing with the statute of limitations, and submitted with the filing fee.*

*Any appeal taken for disciplinary action rendered in an emergency hearing shall be to USA Boxing's CEO and will be conducted in accordance with Article XIV, Section 214.12 of USA Boxing's Constitution and By-laws.*

### **Acceptance**

I pledge to uphold the spirit of this Code, which offers a general guide to my conduct as a participant in a USA Boxing event. I agree to follow the USA Boxing Grievance Procedures if I am charged with violation of the Code. 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 membership in this USA Boxing event.

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Participant Name (*Printed*)

Date

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Participant Name (*Signature*)

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2018 USA BOXING JUNIOR OLYMPIC NATIONAL CHAMPIONSHIPS

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Name of Event

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Witness

Rev.03/03/18

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