

Amateur Boxing Alliance (England) CIC Boxer's Transfer Form

We kindly request the transfer of the following Boxer:

Boxer's Details	New Club and Secretary's Details
Name:	Club Name:
Address:	Club Secretary's Name and Address:
Date of Birth:	
BR1 No:	Tel:
Current club:	Signature

We agree to the transfer of this Boxer

Original Club's details and agreement
Name of Boxer:
BR1 No:
Club:
Club Secretary's Name and Address:
Tel:
Signature

The completed form with the Boxer's card must be sent to the Medical Registrar