

Account Name: Professional Boxing Association
Account Number: 80740012
Sort Code: 40-11-58
HSBC
Reference; BDF + YOUR NAME + LICENCE



BDF Boxer Licence Application

Attach 2 x Passport-size photos
Fee to be paid via Cheque or Bank Transfer

Full Name:..... Date of Birth:..... Age:.....

Professional Name if applicable:.....

Address:.....

County:..... Post Code:..... Country:.....

Tel/Mobile:..... Email:.....

Stance (circle): ORTHODOX or SOUTHPAW Current Weight:..... Boxing Weight:.....

RECORD

Amateur Experience	W	L
Semi –Professional Experience	W	L
Professional Experience	W	L

Date of Last Fight:..... Result of Last Fight:.....

Location of Last Fight:..... Gym/Club where you train:.....

Have you held a Professional Boxing License previously: (circle) YES NO

If Yes, Name of Sanctioning Body:.....

Are you currently under any type of boxer/manager contract? (circle) YES NO

(IF YES) Date of Expiry.....

(IF YES) Name of Manager:.....

OR

Name of Proposed Manager:.....

Annual Boxers Licence: £100

Signature:..... Date:.....

Please complete and return to; PBA, Unit 7, Quarry Farm Business Centre, Bodiam, East
Sussex, TN32 5RA Tel: 01580 831829 Email: info@pbaboxing.com