

Name of Account: Professional Boxing Association
Account No.: 80740012
Sort Code: 40-11-58
Bank: HSBC
Reference: NAME+LICENCE TYPE



PBA Boxer Licence Application

Attach 2 x Passport Photos
Fee to be paid via Cheque or Bank Transfer
Complete and Scan to: info@pbaboxing.com

This form is to be returned WITH completed PBA Medical Form

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 Licence previously? YES NO

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

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

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

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

OR

Name of Proposed Manager:.....

License Type: (TICK)

PBA Day Licence = £25

PBA 12 Month Licence = £75