

Malta Boxing Association

MBA Office: 5, Camelia Street, Hamrun. Malta. HMR1700 Email: maltaboxingsec@gmail.com www.maltaboxingassociation.org

BOXER - CLUB/GYM AGREEMENT FORM

SECTION A – TO BE COMPLETED BY THE BOXER						
DATE OF APPLICATION						
BOXER'S FIRST NAME						
BOXER'S SURNAME						
GENDER	MALE	FEMALE	DATE OF BIRTH	/	/	
ADDRESS						
		POSTCODE				
PHONE NUMBER/S						
EMAIL						
I.D CARD / PASSPORT				(Photocopy	is required)	
	declare that I h	ave no present co	ontract in effect with any oth			
Signature of Boxer:						
SECTION B: TO BE FILLED BY THE DIRECTOR/OWNER OF THE CLUB/GYM						
	(CLUB MU	ST HAVE A V	ALID MBA LICENSE)			
NAME OF CLUB/GYM						
OWNER/DIRECTOR'S NAME						
ADDRESS						
		POSTCODE:				
PHONE NUMBER/S						
EMAIL						
I.D CARD / PASSPORT				(Photocopy	is required)	
I the undersigned hereby declare that the above mentioned boxer is registered with our Club/Gym.						
Signature: Date: /						
IMPORTANT: Any contracts signed between Boxer and Club/Gym will not be endorsed and/or						
recognized by the MBA unless such contract is registered with the MBA.						
The Boxer has the right to move with any Club or Coach at any time unless there is a Contract in effect which is registered with the MBA. Any such movements must be applied for with the MBA.						
To be filled by the Malta Boxing Association						
Date received: / Secretary's Signature:						





