

BOXING SCOTLAND LTD 2020 Scottish Elite Male Open Championships

RAVENSCRAIG REGIONAL SPORTS FACILITY, O'Donnell Way, Motherwell, ML12TZ Saturday 14th March 2020 & Sunday 15th March 2020 Saturday 21st March 2020 & 22nd March 2020 Saturday 18th April Finals

NOTE: All entrants must weigh-in between 08.00 am and 10.00am on the day they are due to Box SCALES WILL CLOSE AT 10.00 am

All entries must be accompanied by an Entry Fee of £15.00

NO ENTRY WILL BE ACCEPTED AFTER 17:00HRS ON FRIDAY 06 MARCH 2020

EMAILED AND POSTAL ENTRIES ONLY (BOXERS BORN 1980 – 2001)

All Bouts will be contested over 3 x 3 Minute Rounds

RY FORM FOR 2020 ELITE MALE OPI Email entries: - competitions@boxings all entries To: Boxing Scotland Ltd, High gow G40 2QH I hereby agree to the BSL Champior by my coach and I along with the ap	scotland.org!!NE Performance Ce hiship Conditions	W EMAIL ADDRESS!! ntre, Olympia Theatre, Orr St and Regulations, they have b	een signed and returned
Light Flyweight	49kg	Welter Weight	69kg
Flyweight	52kg	Middle Weight	75kg
Bantamweight	56kg	Light Heavy Weight	81kg
Light Weight	60Kg	Heavy Weight	91Kg
Light Welter Weight	64kg	Super Heavy Weight	91+kg
	3 x 3 Mir	nute Rounds	
ase relevant category above. I enclose £ S Payment can be made to Account No ub Name by the closing date. NAME (BLOCK CAPITALS):			ence of EYC20 and your
HOME ADDRESS:			
		POST CODE:	
rown/city:			

ENTRIES WILL NOT BE ACCEPTED WITHOUT A COMPLETED CONDITIONS AND REGULATIONS FORM

PLEASE KEEP A COPY OF YOUR ENTRY FORM FOR REFERENCE.
BOXING SCOTLAND LIMITED (BSL)

NATIONAL CHAMPIONSHIP CONDITIONS AND REGULATIONS FOR BOXERS AND COACHES

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GENERAL

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Final entries will be published on the BSL website (www.boxingscotland.org) and social media pages www.facebook.com/boxingscotland & @bringbackboxing ahead of the event as will any further relevant details.

WEIGH IN AND MEDICALS

Each entrant MUST produce their Medical Record Card showing evidence that the Boxer is registered for the current season.

All Boxers must be examined by a BSL Doctor prior to competing and cannot compete unless certified fit to do so by such a Doctor. All boxers must be examined by a BSL Doctor following every bout they compete in and will not have their registration books returned to them until the post medical bout has been completed.

All Elite Boxers are required to wear Pro-wraps. The bandages of each Boxer must be checked and marked by the Equipment Manager at the equipment check table.

Male boxers must be completely clean shaven before undergoing a medical and weigh in. If not, they will be unable to box.

All boxers must complete pre/post bout medical questionnaires before presenting for a medical and weigh in.

Boxer gum shields will be examined prior to entering the Medical/Weigh in area. No red or partially red gumshields may be worn.

If a boxer has hair that reaches below the neckline, a hair net or bandana must be worn to control the hair.

DURING CHAMPIONSHIPS

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Coaches/seconds must be in possession of their Boxing Scotland Coach Registration pass at all times. Access to the Field of Play will not be permitted without a valid BSL Coach Registration badge.

Replacement or Temporary Coach Passes will not be issued during BSL Elite and Youth Championships.

Scotland National team kit must not be worn by any boxer or coach.

Boxers proven not to have fully or truthfully disclosed previous Individual Physical Combat Sport experience can and will be withdrawn from the tournament at any time. Please refer to the BSL Individual Physical Combat Sport Guidance document

BSL reserve the right to bring the BSL Elite and Youth Championships to a premature end as a result of medical emergencies or any health & safety concerns

I/We have read, fully understand and will adhere to all of the above BSL National Championship Conditions and Regulations. I/We understand that failure to adhere to any of the above can lead to removal from any BSL national championship event.

BOXER: (Sign Name)	BOXER: (Print Name)
COACH: (Sign Name)	COACH: (Print Name)
PARENT: (Sign Name)	PARENT: (Print Name)
BOXERS UNDER THE AGE OF 18 MUST HAVE THEIR FORMS	S SIGNED BY A PARENT OR GUARDIAN



BOXING SCOTLAND LTD 2020 Scottish Youth Male Open Championships

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ostal entries To: lasgow G40 2QH I hereby a	Boxing Sco gree to the		Performa	ince Centre, ditions and R	Olympia Tl	heatre, Ori	r Street, Bridgeton e been signed and me for the:	
	_ \	Youth Male 2003					Youth Male 200	2
Light-Fly	49kg	Welter	69kg		Light-Fly	49kg	Welter	69kg
Fly	52kg	Middle	75kg		Fly	52kg	Middle	75kg
Bantam	56kg	Light-Heavy	81kg		Bantam	56kg	Light-Heavy	81kg
Light	60kg	Heavy	91kg		Light	60kg	Heavy	91kg
Light-Welter	64kg	Super-Heavy	91+kg	Li	ght-Welter	64kg	Super-Heavy	91+kg
	be made		nclose £	-	fee (PAYABLI		G SCOTLAND LTD) erence of EYC20	and your
NAME (BLOCK CA	APITALS):					D.	.О.В.	
HOME ADDRESS:						DOST		
TOWN/CITY:						POST CODE:		
HOME TEL. NO.				-	CLUB:		-	
REGISTRATION N	UMBER:			_				

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All Youth Boxers are required to wear the AIBA Hand wraps only. (Bandages must not be longer than 4.5 m (14.76 feet), and not shorter than 2.5 m (8.2 feet). Bandages must be 5.7 cm (2 ¼ inches) wide. Bandages must be made of stretchy cotton material with a Velcro closure) The bandages of each Boxer must be checked by the Equipment Manager at the equipment check table.

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DURING CHAMPIONSHIPS

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COACH: (Sign Name)	COACH: (Print Name)
PARENT: (Sign Name)	PARENT: (Print Name)

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BOXING SCOTLAND LTD 2020 Scottish Female Elite Open Championships

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ostal entries To: Boxing Scotland	@boxingscotland.org!!NEW EMAIL ADDRESS!! d Ltd, High Performance Centre, Olympia Theatre, Orr Street, Bridgeton,
asgow G40 2QH	
	Championship Conditions and Regulations, they have been signed and returned with the appropriate payment and request you enter me for the:
ayy couch and runong s	The separate payment and request year enter the re-
	Female Elite Open
	Weight Category
	45-48kg 64kg
	51kg 69kg
	54kg 75kg
	57kg 81kg
	60kg 81+kg
	3x3 Minute Rounds
Please ☑ relevant catego	ory above. I enclose £ entry fee (PAYABLE TO: BOXING SCOTLAND LTD)
_	count No: 00663179 Sort Code 83-20-06 with a reference of EYC20 and you
ub Name by the closing date.	
NAME (BLOCK CAPITALS):	D.O.B.
HOME ADDRESS:	

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REGISTRATION NUMBER:

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COACH: (Sign Name)	COACH: (Print Name)
COACII. (Sign Name)	COACH. (Filit Name)
PARENT: (Sign Name)	PARENT: (Print Name)
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DECLARATION OF NON PREGNANCY FOR WOMEN BOXERS AGED 18 (EIGHTEEN) AND OLDER

Date:
Place:
Name of Competition:
I, <u>INSERT BOXER'S NAME</u> , declare that I am not pregnant.
I understand the seriousness of this statement and accept full responsibility for it. In the case that this declaration subsequently shown to be inaccurate or untrue and I suffer any related injury or damage during the competition, on behalf of myself, my heirs, executors and administrators, waive and release any and all claims for damages I ma have against Boxing Scotland (including its officials and employees), the organizers of the competition (including the Organizing Committee and/or the Host Federation) and the Competition Venue owners for such injury or damage.
Signature of the Boxer



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X------ONLY THE TEAR OFF SECTION BELOW IS TO BE RETURNED TO BOXING SCOTLAND------

ostal entries To: Boxing Scotla asgow G40 2QH	ons@boxingscotland.cand Ltd, High Perform	org!!NEW EMAIL ADDRESS!! ance Centre, Olympia Theatr	
by my coach and I alon	g with the appropriat	e payment and request you	enter me for the:
	FEMALE YOUTH 2003 3x3 Minute Rounds		YOUTH 2002 nute Rounds
45-4	18KG 64 KG	45-48KG	64 KG
5	1 KG 69 KG	51 KG	69 KG
5	4 KG 75 KG	54 KG	75 KG
5	7 KG 81 KG	57 KG	81 KG
6	0 KG 81+ KG	60 KG	81+ KG
	Account No: 006631		ABLE TO: BOXING SCOTLAND Ltd) a reference of EYC20 and your
NAME (BLOCK CAPITALS):			D.O.B.
HOME ADDRESS:			
		PO	- -
TOWN/CITY:		CO	DE:
HOME TEL. NO.		CLUB:	
REGISTRATION NUMBER:			

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PARENT: (Sign Name)	PARENT: (Print Name)
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DECLARATION OF NON-PREGNANCY FOR GIRLS BOXERS AGED UNDER 18 (EIGHTEEN) YEARS

Date:
Venue:
Name of Competition:
I, INSERT BOXER'S NAME 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 <u>INSERT BOXER'S NAME</u> suffers any related injury or damage during the competition, I on behalf of <u>INSERT BOXER'S NAME</u> , her heirs, executors and administrators, waive and release any and all claims for damages she may have against Boxing Scotland (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