

Boxer's Registration Form:

Boxer: _____	Position: _____	Age: _____
Company Contact: _____	Position: _____	
Company: _____	Telephone : _____	Mobile: _____
Address: _____	Email: _____	
_____	Post Code: _____	

Entry details

All participants must be in good health and not suffering from any medical condition and compete entirely at their own risk. Entry is restricted to a minimum age of 18 years.

Rules and Safety

All boxers MUST arrive at least 1 hour before their bout in order to attend the safety briefing. All boxers accepted for entry must abide with the competition rules and each competitor must sign a disclaimer before the event.

Entries

Please send completed entries to "White Collar Boxing" Sparkle Appeal, St Woolos Hospital, Newport. NP20 4SZ and make all cheques made payable to **The Sparkle Appeal**.

Please read and sign

We agree with the entry conditions and I hereby release **The Sparkle Appeal** (South Gwent Children's Foundation), their agents, officials and volunteers for any injury/loss caused through taking part in 'White Collar Boxing' we compete entirely at our own risk.

Entry fee

Requirement	Yes / No	Amount	Enclosed
Boxer's Entry Fee		N/A	

Company Contact _____ Date: _____

Boxer _____ Date: _____