

ARMY BOXING ASSOCIATION – CERTIFICATE OF ASSURANCE APPLICATION

BOXING COMPETITION –

TITLE DATE OF EVENT

(UNIT) V (UNIT / ORG)

TYPE OF EVENT (please circle or highlight)

A Mil pers v Civ @ civ location B Mil pers v Civ @ mil location

C Mil pers only / Civ location D Civ pers v Civ pers @ Mil loc

E Mil pers / Mil loc (For Example Inter Coy or Inter Unit on Camp)

An administrative fee of £25 is required for options A – D but not E which remains free. Cheques should be made payable to ASCB Central Bank and should be enclosed with your application **8 WEEKS** prior to the event.

VENUE

POST CODE

BOXING OFFICER

ADDRESS

.....

RINGSIDE PHYSICIAN (if Known).....

APPOINTED SUPERVISOR (If known)

EMAIL ADDRESS (please make this another123@mod.co.uk or civilian style address as the ASCB are not on a military IT Network)

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TELEPHONE MIL MOBILE NO.....

PLEASE SEND THIS APPLICATION TO.

Secretary Army Boxing Association OR ABA@ASCB.UK.COM

TELEPHONE ARMY BOXING ASSOCIATION 94 222 7089