



BRITISH BOXING BOARD OF CONTROL LTD

APPLICATION OF BBBOFC LICENSED BOXER TO BOX OUTSIDE OF THE BOARD'S JURISDICTION

BOXER NAME: _____

NAME OF OPPONENT: _____

DATE OF CONTEST: _____ **ROUNDS OF CONTEST:** _____

TITLE OF CONTEST: _____

WEIGHT CATEGORY: _____

NAME OF MANAGER: _____

NAME OF PROMOTER: _____

VENUE (Including City & Country): _____

**GOVERNING FEDERATION/COMMISSION UNDER WHOSE JURISDICTION THE CONTEST IS TO
TAKE PLACE:** _____

PURSE: _____

NAMES OF LICENCE HOLDERS ACCOMPANYING BOXER: _____

ADDRESS OF HOTEL: _____

DATE OF DEPARTURE: _____

SIGNED: _____

DATED: _____

Once completed please return to dgilmartin@bbbofc.com