INDIAN BOXING FEDERATION

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Phone:- +91-11-23743560 Fax:- +91-11-23743561
Website: www.indianboxing.in Email: iabf@vsnl.com

Passport Size Photograph

Executive Committee Member / President / Secretary (State/IBF/AIBA)

Registration No: _____ Date _____

State: _____ Board _____

Name: _____

Designation: _____

Father's Name: _____

Date of Birth: __ __ - __ __ - __ __ __ __ Blood Group: A+ A- B+ B- O+ O- AB+ AB-

Place & State of Birth: _____

Identification Mark: _____

Address: _____

Email Id: _____

Mobile No: _____

Telephone No : _____ FAX No _____

Educational Qualification: _____

Sports Achievement: _____

Designation	Elected Date	Elected Till
Executive Committee Member		
President		
Secretary		

Signature & Stamp
President/ Secretary
State / Board Boxing Association

_____
Signature

Note: Rules for Registration

1. This form is not meant for Commission / Committee Members (IBF/AIBA), R/J, Boxing Coach /Trainer / Team Manager.