



INDIAN BOXING FEDERATION

Room No 2, IInd Floor, Palika Place, Panchkuian Road, New Delhi-10001

Phone:- +91-11-23743560 Fax:- +91-11-23743561

Website: www.indianboxing.in Email: iabf@vsnl.com

Passport Size
Photograph

Referee / Judge Registration Form

Registration No:	<input type="text"/>	Date	<input type="text"/>
State:	<input type="text"/>	Board	<input type="text"/>
Name:	<input type="text"/>		
Father's Name:	<input type="text"/>		
Designation:	State	IBF	AIBA
	1 STAR	2 STAR	3 STAR
Date of Birth:	<input type="text"/>	-	<input type="text"/>
	-	<input type="text"/>	<input type="text"/>
		Blood Group:	A+ A- B+ B- O+ O- AB+ AB-
Place & State of Birth:	<input type="text"/>		
Identification Mark:	<input type="text"/>		
Address:	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Email ID:	<input type="text"/>		
Mobile No:	<input type="text"/>		
Telephone No :	<input type="text"/>		FAX No: <input type="text"/>
Educational Qualification:	<input type="text"/>		
	<input type="text"/>		
Boxing Achievement:	<input type="text"/>		
	<input type="text"/>		

Qualification*	1 STAR Date & Place	2 STAR Date & Place	3 STAR Date & Place
Referee / Judge State	<input type="text"/>	<input type="text"/>	<input type="text"/>
Referee / Judge IBF	<input type="text"/>	<input type="text"/>	<input type="text"/>
Referee / Judge AIBA	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Kindly attach photocopy of qualification certificates

Signature & Stamp
President/ Secretary
District / Club / State / Board Boxing Association

Signature of Official

Note: Rules for Registration

1. This form is not meant for Executive Committee Members / Commission Members (IBF/AIBA), Presidents, Secretaries, active Boxing Coach/ Trainer and Team Manager.
2. Details of Registration will not be changed once Identity Card is issued.