



INDIAN AMATEUR BOXING FEDERATION

Referee & Judge Examination Form

PHOTO

NAME: IABF Registration No.....

SEX: MALE FEMALE BLOOD GROUP

DATE OF BIRTH

EDUCATION QUALIFICATION

IABF CERTIFICATION LEVEL

ACADEMICS

PERFORMANCE AS A BOXER

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PERFORMANCE AS A R/J

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MOBILE No.: E-MAIL:

ADDRESS:

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SIGNATURE OF PRESIDENT / SECRETARY
State / Board Boxing Association

AUTHORISED STAMP

SIGNATURE OF CANDIDATE'S

ELIGIBILITY CRITERIA

1. Applicants should have Participated in State Boxing Championship.
2. Applicants should be R/J for more than 1 years with State Associations or Institutions.
3. Medical Fitness certificate.
4. Applicants should have a valid Certificates.
5. Course Fee: Rs. 3000 (Rupees Three Thousand only) Cash/Chque/DD in fevour of Indian Amateur Boxing Federation.

Application form sent with all copy of their valid certificates to:-

Ms. Razia Shabnam

Chairperson, Ring Officials Commission

Room No. 2, II Floor, Palika Place, Punchkuian Road, Near R.K. Ashram Metro Station,

New Delhi-110001 Mobile No. 9831399038 Telephone No: 011-23743560, Fax No.: 011-23743561

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