

Notes:

COACHES

2018 FLORIDA GOLDEN GLOVES

Entry Form application

PLEASE WRITE LEGIBLY

NAME

ADDRESS

CITY

ZIP

EMAIL

USABOOK#

FLORIDA ASSOCIATION

FLORIDA GOLDCOAST

CLUB NAME / UNATTACHED

DOB

AGE

Name of fighters:

Coach's registration form

In consideration of accepting this entry form, I, intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all claims for damages I may have against Florida Golden Gloves, Golden Gloves Charities of South Florida, Florida Gold Coast Boxing, and Florida Association Boxing, their agents, representatives, and assigns for any and all injuries suffered by me at said boxing tournament.

Coach's Signature _____

Official Use Only

Received By: _____