

Region 1Upper Midwest Golden Gloves Tournament 2020 Sunday, March 15th 2020

Athlete Application

This application must be received by the Region 1 Director by 12 noon Saturday, March 7th 2020 NO EXCEPTIONS

A copy of a birth certificate, passport, divers license, state ID (proof that applicate has been in the USA for one year) must be included with this application.

If the boxer has participated in this tournament before, check to confirm that your Regional Director has past paperwork, then none is needed.

Please circle your weight class

	Male 108	114	123	132	141	152	165	178	201	201+		
	Female	106	112	119	125	132	141	152	165	178	178+	
Date												
Boxer's shirt	size: sm	med lo	g xlg	xxlg		Jacket s	ize: sı	m me	d lg	xlg	xxlg	
Boxer's Name:Current Age												
USA Athletes Passbook #						Date of Birth//						
Boxers Email	l											
Address												
City					_State_			Zip)			
Phone	none Alt Phone											
Club	lubCoach											
(boxer may fi	ght unattache	ed-please	indicat	e)								
Coaches email						Phone						
Boxer's Signa	ature							Date_				