



2023 ATHLETE ENTRY RGV Golden Gloves

Weight Division _____ Lbs.

OFFICIAL USE ONLY

Male Female

FRANCHISE REPRESENTED:

Boxer's Name (Print) (*First, Initial, Last*) _____ U.S. Citizen ___Yes ___No

Street _____ City _____ State _____ Zip _____

Age _____ Birthdate _____ - _____ - _____ Phone () _____ OR () _____
MO DAY YEAR

E-mail: _____ USA Passbook Validation # _____

WEIGHT CLASS: Circle One

Male	112-lb	125-lb	132-lb	139-lb	147-lb	156-lb	165-lb	176-lb	203-lb	+203-lb
Female	110-lb	119-lb	125-lb	132-lb	139-lb	146-lb	154-lb	165-lb	178-lb	178-lb+

WAIVER / WARNING / DISCLAIMER

In consideration of your accepting this entry, 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 Golden Gloves of America, its member franchises, United States Amateur Boxing, any sanctioning Local Boxing Committees of USA Boxing, and all sponsors and venue owners, or the officers, sub-committees, agents, representatives and assigns of these entities, for any injury or damage suffered by me during my participation in, and/or, arising from traveling to and/or returning from the below listed boxing event:

2023 RGV GOLDEN GLOVES – February 24-26, 2023

I agree to abide by the rules of Golden Gloves of America and USA Boxing, I acknowledge that by signing this document, I hereby freely agree to and make the following contractual representations, covenants and agreements to and for the benefit of United States Amateur Boxing (USA boxing), any sanctioning local boxing committee of USA boxing and all promoters, sponsors and venue owners with respect to the events, and their respective agents, officers, employees, members and affiliates (collectively, releasees). I acknowledge that boxing is an inherently dangerous sport and fully realize the dangers of participating in boxing competition and preparation for the competition, and fully assume the risks associated with such participation, the releasees' own negligence, and the possibility of serious physical and/or mental trauma, injury, permanent paralysis or death associated with boxing competition. I certify that I had no injuries to my hands, whether fractures, broken bones or otherwise, within three months preceding the dates of this entry form and the events, and have no injuries to the head, concussion, headaches or fainting spells, and should I experience any of these injuries and conditions in the future, I will immediately notify the officials of the events and cease all participation in the events. For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively, successors) I hereby waive, release, discharge, hold harmless, and promise to indemnify and covenant not to sue the releasees from any and all rights and claims including claims arising from the releasees' own negligence, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in, or association with the events, or travel to, or return from the events. I agree it is my sole responsibility to be familiar with the facilities for the events, the releasees' rules, and any special regulations for the events. I understand and agree that situations may arise during the events which may be beyond the immediate control of releasees. I accept responsibility for the condition and adequacy of my competition equipment and physical condition. I assume all responsibility and liability for the selection of the equipment I use in the events and with my ability and physical condition to participate in the events. I understand that drug testing may be conducted for athletes registered for the events and that the use of substances prohibited by releasees' rules would make me subject to sanctions including, but not limited to, disqualification and suspension. I agree to be subject to drug testing, if selected, and its sanctions if I fail to comply with the testing or am found positive for the use of a banned substance. I understand and agree that medical or other services rendered to me by or at the insistence of any of the releasees is not an admission of liability to provide or continue to provide such services and is not a waiver by any of releasees of any right or benefit hereunder. I agree, for myself and my successors, that my representations are contractually binding, and are not mere recitals, and that should I or my successors assert any claim in contravention of this agreement, the asserting party shall be liable for the expenses (including legal fees) incurred by the releasees. This agreement may not be modified orally and a waiver of any provision shall not be construed as a modification of any other provision herein or as a consent to any subsequent waiver or modification. Every term and provision of this agreement is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable.

Athlete's Signature: _____

Date: _____

Franchise Delegate: _____

Date: _____