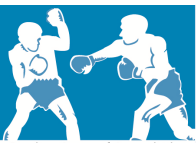


MBA

Macao Boxing General Association

澳門拳擊總會

Macau Boxing General Association

運動員登記表/Boxer registration form**個人資料Personnel Information**

中文姓名Name in Chinese _____

英文姓名Name in English _____

性別/Gender

男 Male

女 Female

手機號碼/Mobile No. _____

地址/Address _____

出生日期/Date of Birth

____ / ____ / ____ (日/月/年) (Day/Month/Year)

澳門居民身份証號碼/BIR _____

電郵地址/email _____

澳門特別行政區護照/Passport _____

拳擊經驗Boxing Training Experience

體重(公斤)weight(KG)

_____ KG

訓練開始年期/Start Training _____

年year

所屬體育會/Club _____

教練姓名/Coach Name _____

聯絡電話/Contac phone _____

聲明 Declaration

本人明白自己身體狀況適宜接受訓練並必須服從教練指示，本人在練習或比賽中如有受傷需自行負責，拳擊總會及相關人仕均無需負上任何責任

I certify that I am physically fit and fully obey trainer's instruction and shall be liable for any injury to my person during in training and competition. Macau Boxing General Association and relevant people need not to take any responsibility of all risks to my physical well-being.

運動員員簽署Boxer's signature _____

日期Date _____

由本會填寫 /Official Used only

國際拳聯編號/AIBA No. _____

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