



**2009 JUNIOR GOLDEN GLOVES NATIONALS
OFFICIAL NON-ATHLETE ENTRY FORM**

SANCTIONED BY UNITED STATES AMATEUR BOXING

Name _____ LBC _____ Region # _____

Boxing Club/Team Name: _____ E-Mail Address: _____

Address _____

Street _____ City _____ State _____ Zip _____
Phone (____) _____ Validation # _____ D.O.B.. _____

Check one: Official _____ Coach _____ Other, please state _____

WAIVER/WARNING

In consideration of your accepting this entry, I hereby, for myself, my heirs, executors, administrators and assigns waive and release any and all rights to any claim for damages I may incur or might have against Golden Gloves of America, its member franchises, United States Amateur Boxing, any sanctioning Local Boxing Committees of USA Boxing, Golden Gloves of Nevada, Barry's Boxing Center, Black Gaming, LLC; RBG LLC dba CasaBlanca Resort & Casino; and CasaBlanca Resorts LLC dba Oasis Resort & CasinoBWW, 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 2009 Junior Golden Gloves National Tournament – July 22-July 26 – Mesquite, Nevada.

I agree to abide by the rules of Golden Gloves of America and USA Boxing. I fully understand that I assume all responsibility for any injury or damage that I may incur in this boxing competition. I understand and agree that medical or other services rendered to me by or at the insistence of any of the named parties is not an admission of liability to provide or continue to provide any such services and is not a waiver by any of said parties of any right or rights hereunder.

I certify that I have no injuries or health condition that prevent me from participating in any capacity which Golden Gloves of America and USA Boxing recognizes as a non-athlete registrant in its official rules and constitution and by-laws.

In addition, I also understand and appreciate that participation in sport carries a risk to me of serious injury, including permanent paralysis or death. I voluntarily and knowingly recognize, accept and assume this risk.

Signed _____ Date _____