



Sanction Application Manitoba Amateur Boxing Association

Last Revised: March 2025

Date of Application: _____ **Date of Competition:** _____

Sponsor Club: _____

Main Contact Name: _____

Phone #: _____ **E-Mail:** _____

Name of Event: _____

Venue Location: _____

Weigh-In & Medicals Location: _____

Time of Weigh-Ins: _____ **Time of Medicals:** _____

Time of Bouts: _____ **Proposed # of Bouts:** _____

**Competitions with more than 12 bouts require a second doctor at the host club's expense. First doctor will be supplied by Boxing Manitoba, but Boxing MB is not liable for any doctor cancellations due to illness, accident, or other unforeseeable circumstances.*

Ring Set Up Required? **YES** (available within Wpg) **NO** (ring set-up not available outside Winnipeg)

**Transportation outside of Winnipeg will be host club's responsibility. Mileage will be at their own expense. Rental fee still applies. Renter agrees to act as the caretaker of the ring and trailer and prevent misuse of all equipment for the duration of transport, set-up, event and take-down, and will report any damage immediately to the board of directors.*

Doctor Fees: Medicals/Weigh-ins are \$250 (2-3 hrs) per doctor. Ringside Services are \$500 (up to 4 hrs) per doctor. Additional fees may apply for events of excessive duration as determined by the doctor on duty. Clubs may prefer to supply their own doctor(s) & negotiate compensation. Doctors must submit their medical license number and contact information to Boxing Manitoba prior to event.

Clubs Contacted/Confirmed:
 Brave Boxing (Dave's Gym) Brickhouse 24/7 Canadian Fighting Center (CFC) Central Boxing
 Eastman Boxing (*Beausejour*) Maulers (*Selkirk*) Minegoziibe (Pine Creek) Pan Am Boxing (PABC)
 Peak Performance (Brandon) Power Boxing Red Warrior (*Peguis*) Underdog Boxing Academy (UBA)
 United Boxing (UBC) WAMMA NextGen Other _____

Completed form and fee of \$150 must be received in the Boxing Manitoba office a minimum of 30 days prior to the competition date. Make cheque payable to Manitoba Amateur Boxing Association or send e-transfer to info@boxingmanitoba.com. See the Sanction Policy for more info.

The Host Club agrees to the aforementioned conditions of the Sanction Request as signed by:

Name of Authorized Signor	Signature	Date

FOR OFFICE USE ONLY: Date paid: _____ Cash/E-transfer/Cheque # : _____

Date received: _____ Primary Doctor: _____

Chief Official: _____ Secondary Doctor: _____