

UNITED STATES BOXING COUNCIL PROMOTIONS APPLICATION FORM FOR USBC CHAMPIONSHIP CONTESTS

PLEASE TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM.

Official Website: www.wpbf-usbc.com

APPLICANT'S CONTACT DETAILS		
1. Name of Company	2. Name of Promoter/CEO/Presider	
3. Address (Number and Street, Town or City)	(State or Country)	(Zip/Postal Code
4. Contact Details (Office Phone)	(Office Fax)	(Mobile Phone)
(Official Website)	(Office E-mail)	(Business E-mail)
PROPOSED EVENT DETAILS		
5. Place of Event		
6. Venue of Event	7. Seats of Venue	
3. Date of Event	9. Televised	Yes No
0. Weight Division		
1. Name of Champion	Champion's Record	
2. Name of Challenger	Challenger's Record	
OCAL COMMISSION'S CONTACT DETAILS		
4. Name of Local Commission	15. Name of President/Chairman	
16. Contact Details (Office Phone)	(Office Fax)	(Mobile Phone)
(Official Website)	(Office E-mail)	

I certify that this application form has been completed truly and accurately, to the best of our knowledge. We agree to abide by the Constitution, Bylaws, Rules and Regulations of WPBF/USBC.

Signature Date