



8. E-mail Address \_\_\_\_\_
9. Contact Numbers \_\_\_\_\_
- Primary Telephone                      Alternate Telephone                      Fax

10. Do you have a **current** or **expired** boxing or wrestling license, certification or registration issued by the Commonwealth of Virginia or any other jurisdiction?

No ☐

Yes ☐ If yes, complete the following table.

Business/Individual's Name	State	License, Certification or Registration Number	Expiration Date

11. Have you ever been found guilty of any material misrepresentation while engaged in boxing, wrestling, or other athletic activities, or any conviction, guilty plea or finding of guilty, regardless of adjudication or deferred adjudication, of any felony or misdemeanor?

No ☐

Yes ☐ If yes, please attach a record of conviction, authenticated in such form as to be admissible as evidence under the laws of the jurisdiction where convicted.

12. Has any (including Virginia) local, state or national regulatory body in any jurisdiction ever taken a disciplinary action against you, your business or any member of your responsible management in connection with participation in or promotion of professional athletic contests or activities including, but not limited to, monetary penalty, fine, suspension, revocation, or surrender of a license in connection with a disciplinary action

No ☐

Yes ☐ If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

13. Have you ever been convicted in any jurisdiction of a ***misdemeanor and/or felony***? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.

No ☐

Yes ☐ If yes, list the misdemeanor and/or felony conviction(s). Attach your original criminal history record; a certified copy of the final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision; and any other information you wish to have considered with this application (e.g., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation etc.).

*Original criminal history records may be obtained by contacting the state police in the jurisdiction in which you were convicted. Virginia residents must obtain a complete criminal history record. You may obtain a request form from the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472 or by contacting your local State Police Division. Certified copies of court records may be obtained by writing to the Clerk of the Court in the jurisdiction in which you were convicted. The address is available from your local police department.*

14. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the decision to approve this application. I certify that I will notify the Department if I am subject to any disciplinary action or convicted of any felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 8.1 of the *Code of Virginia* and the *Virginia Professional Boxing, Wrestling and Martial Arts Regulations*.

I understand as a professional boxer I should be aware that this sport includes many health and safety risks, in particular the risk of brain injury. As such, I will take the necessary medical exams that detect brain injury. If I need further information about these exams, I will ask my doctor or staff of the Department.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Required Documentation

All boxing applicants must provide the following documentation dated within 180 days prior to participating in an event:

- A. A certification from a licensed physician within the past six months certifying that the applicant is in good physical health and that the physician has not observed any abnormalities or deficiencies that would prevent the applicant from participation in a boxing event or endanger the applicant, the public, officials or other licensees participating in the event. The department may require additional medical tests to determine the fitness of a boxer upon receipt of reliable information of a preexisting condition that may present a danger to the boxer.
- B. A complete professional record or, if amateur just turning professional, an amateur record, an amateur passbook recognized by USA Boxing, or a letter from the applicant's trainer certifying the applicant's boxing experience, skill level, physical condition and current training program.
- C. A satisfactory record of professional boxing or, in the case of applicants who have participated in fewer than five professional boxing bouts, evidence of competency in the elements of offense and defense. Such evidence may take the form of signed statements from individuals who have provided training to the applicant or records of the applicant's conduct in amateur as well as professional boxing competition and shall be sufficient to satisfy the department that the applicant has the ability to compete.
- D. A boxer must provide the department a negative test for the following\*:
  - 1. antibodies to the human immunodeficiency virus;
  - 2. Hepatitis B surface antigen (HBsAg); and
  - 3. antibodies to virus hepatitis C.

\* Such tests shall be conducted within the 180 days preceding the event. A boxer or contestant who fails to provide the department with the required negative test results shall not be permitted to compete in the event or contest.

OFFICE USE ONLY	Passport ID No.	Country	Expiration Date
-----------------------	-----------------	---------	-----------------