

**BUFFALO**  
(New York State)  
**GOLDEN GLOVES TOURNAMENT**  
**SANCTIONED BY THE USA Boxing**

<p><b>January 27, 2019</b></p> <p><b>March 24, 2019</b></p> <p><b>Finals April 21, 2019</b></p> <p><b>Buffalo Riverworks</b> 359 Ganson st Buffalo, NY</p> <p><b>February TBA -</b></p>	<p>Contact: E-mail <b><u>BuffaloGoldenGloves@live.com</u></b></p> <p><b>All entries must be in by</b> <b>January 7, 2019</b></p> <p>Website: <b>www.BuffaloGoldenGloves.com</b></p> 	<p><b>Includes Boxers from</b> <b>Niagara District and Adirondacks</b> Buffalo, Rochester, Niagara Falls, Salamanca, Lockport, Jamestown, Geneva, Syracuse, Cortland, Watertown, Albany, Schenectady, Adirondacks, Ithaca, Elmira, Utica, Massena and all surrounding areas</p> <p>Contact: phone 716-400-9697</p>
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Golden Gloves consist of sub-novice, novice, open seniors and 15 -17 years old, Male and Female. However, Sub-novice, Novice and 15-17 years old will not advance to the Nationals. Only open class male & female winners will advance to the Chattanooga, Tennessee May 6 – May 11, 2019. All boxers must compete in their local/regional tournaments in order to advance with expenses being paid by the franchise. Unopposed boxers may advance if they pay their own expenses, subject to the approval of their franchise delegate.

Boxers ages 15 -17 years old will compete for the New York State Golden Gloves Title (not an advancing tournament) Masters will compete for the Upstate NY Championships.

1. All participants (boxer, coaches, seconds, judges, referees, timers, clerks, etc.) **MUST** register with USA Boxing and must comply with the rules and regulations of USA Boxing, Golden Gloves and the Niagara Association.
2. Ages-18 through 40 (age determined by the boxers age on the first day of competition)
3. Any boxer who enters the tournament and does not appear will be subject to suspension.
4. Sub Novice Class: Boxer with 2 bouts or less.
5. Novice Class: With zero (0) to ten (10) Bouts will be a Novice Boxer, at five (5) bouts a Boxer may elect to enter the Open Senior Division, however, once the Boxer declares to be in the Open Senior Division he cannot return to the Novice Division.
6. Open Class; a boxer who has competed in ten (10) or more boxing matches in any country;  
-At the discretion of the coach and boxer, a boxer who has competed in five (5) or more sanctioned bouts is eligible to compete as an Open class boxer.  
- A Boxer who won a Novice title in any USA Boxing sanctioned tournament. Tournaments include the Golden Gloves, State Final Competitions, Ringside Tournament, and Invitational Tournaments etc...
7. Boxers with prior combat sport experience involving striking (MMA, Kick Boxing etc...) cannot enter tournament as sub novice or Novice. They must enter as open class
8. Boxers must be **clean-shaved** before all Medical Examinations. **Beards and moustaches** will not be allowed. No type of body piercing and no body accessories will be permitted to be worn during a Bout.

**ENTRIES CLOSE: January 7, 2019**

CIRCLE ONE:	Male	Female	15-17 years old	Master 35+
CIRCLE ONE:	SUB-NOVICE	NOVICE	OPEN	
CIRCLE ONE: Male	108	114	123	132
CIRCLE ONE: Female	106	112	119	125
	141	152	165	178
	201	201+	178	178+

Name \_\_\_\_\_ Reg# \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Club Affiliation \_\_\_\_\_ Won \_\_\_\_\_ Lost \_\_\_\_\_

Boxer's Signature \_\_\_\_\_ Coaches Signature \_\_\_\_\_

Parent's Signature (if under 18) \_\_\_\_\_

Please fill in completely (both sides) and return by mail to:

Buffalo Golden Gloves  
389 Lafayette Avenue  
Buffalo New York 14213

All entries must be in by January 7, 2019

Name: \_\_\_\_\_ LBC: \_\_\_\_\_ Region: \_\_\_\_\_

Address: \_\_\_\_\_ Date of birth \_\_\_\_\_ Wt: \_\_\_\_\_

Phone: \_\_\_\_\_ Regist. Number \_\_\_\_\_

Personal Coach Name / Phone: \_\_\_\_\_

Personal Boxing Club: \_\_\_\_\_

Do you wear dental braces: \_\_\_\_\_ If yes, you must comply with Article 2, 102.6 USA Boxing rules.

WAIVER/WARNING/RELEASE/COVENANT

I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT I hereby freely agree to and make the following contractual representations, covenants and agreements TO AND FOR THE BENEFIT OF UNITED STATES AMATEUR BOXING (USA BOXING), ANY SANCTIONING LOCAL BOXING COMMITTEE OF USA BOXING AND ALL PROMOTERS, SPONSORS AND VENUE OWNER WITH RESPECT TO THE AND THEIR RESPECTIVE AGENTS, OFFICERS, EMPLOYEES, MEMBERS AND AFFILIATES (COLECTIVELY, RELEASEES). I acknowledge that boxing is an inherently dangerous sport and fully realize the dangers of participating in boxing competition and preparation for the competition, and FULLY ASSUME THE RISKS ASSOCAITED WITH SUCH PARTICIPATION, THE RELEASEES/OWN NEGLIGENCE, and the possibility of serious physical and/or mental trauma injury, PERMANENT PARALYSIS OR DEATH associated with boxing competition. I CERTIFY THAT I HAVE HAD NO INJURIES TO MY HANDS, whether FRACTURES, BROKEN BONES or otherwise, WITHIN THREE MONTHS PRECEING THE DATES OF THIS ENTRY FORM and the Events. AND have NO INJURIES TO THE HEAD, CONCUSSION, headaches or FAINTING SPELLS, AND SHOULD I experience ANY OF THESE INJURIES AND CONDITIONS IN THE FUTURE I WILL IMMEDIATELY NOTIFY THE OFFICIALS of the Events and cease all participation in the Events. For myself, my heirs executors, administrators, legal representatives, assignees and successors in interest (collectively, Successors) I HEREBY WAIVE, RELEASE, DISCHARGE, HOLD HARMLESS, AND PROMISE TO INDEMNIFY AND covenant NOT TO SUE the Releases FROM ANY and all rights and CLAIMS INCULDING CLAIMS ARISING FROM THE RELEASEES' OWN NEGLIGENCE, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in PR association with the Events, or travel to or return from the Events. I agree it is my sole responsibility to be familiar with the facilities for the Events, the Releasee's rules and any special regulations for the Events. I understand and agree that situations may arise during the Events which may be beyond the immediate control of Releasees. I accept responsibility for the condition and adequacy of my competition equipment and physical condition. I assume all responsibility and liability for the selection of the equipment I use in the Events and with my ability and physical condition to participate in the Events. I understand that drug testing may be conducted for athletes registered for the Events and that the use of substances prohibited by Releasees rules would make me subject to sanctions including, but no limited to, disqualification and suspension I agree to be subject to drug testing if selected, and its sanctions if I fail to comply with the testing or am found positive for the use of a banned substance. I UNDERSTAND AND AGREE THAT MEDICAL OR OTHER SERVICES RENDERED TO BE MY OR AT THE INSISTENCE OF ANY OF THE Releasees OF ANY RIGHT OR benefit HEREUNDER. I agree, for myself and my Successors, that my representations are contractually binding, and are not more recitals, and that should I or my successors assert any claim in contravention of this agreement, the asserting party shall be liable for the expenses (including legal fees) incurred by the Releases in defending, this agreement may not be modified orally and a waiver of any provision shall not be construed as a modification of any other provision herein or as a consent to any subsequent waiver or modification. Every term and provision of this agreement is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the others terms and provisions, which shall remain binding and enforceable.

CONSENT AND RELEASE OF PARENT OR GUARDIAN REQUIED IF ENTRANT IS UNDER LEGAL AGE (18 YEARS OF AGE): I am the parent or guardian of the above athlete registrant (child). My child is mentally and physically fit for the Events, and I consent to my Child's participation. I HAVE READ AND UNDERSTAND THE ABOVE ENTRY FORM AND RELEASE AGREEMNT. In consideration of allowing representatives and assignees, I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMELSS AND CONVENANT NOT TO SUE THE RELEASEES FROM OR AS TO EVERY CLAIM AND ANY LIABILITY that I or my Child may allege against the Releases (including reasonable attorney's fees or cost (as a direct or indirect result of injury or death to me or my child because of my Child's participation in the Vents, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES or others.

Signed \_\_\_\_\_ Date \_\_\_\_\_ Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_ Signed \_\_\_\_\_ Date \_\_\_\_\_

Boxers Coach \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_