



# BOXER'S CARD

PHOTO	BOXER NAME:
	UNIT:
	DATE OF BIRTH:
	WEIGHT CATEGORY:

### MEDICAL OBSERVATION

SR. NO.	DATE	FIT/UNFIT	REMARK	M.O. SIGN
1		FIT / UNFIT		
2		FIT / UNFIT		
3		FIT / UNFIT		
4		FIT / UNFIT		
5		FIT / UNFIT		

### WEIGHT RECORD

SR. NO.	DATE	WEIGHT	REMARK	T.O. SIGN
1				
2				
3				
4				
5				

NOTE: PRINT YOUR NAME IN CAPTIAL LETTERS ONLY



# BOXER'S CARD

PHOTO	BOXER NAME:
	UNIT:
	DATE OF BIRTH:
	WEIGHT CATEGORY:


### MEDICAL OBSERVATION

SR. NO.	DATE	FIT/UNFIT	REMARK	M.O. SIGN
1		FIT / UNFIT		
2		FIT / UNFIT		
3		FIT / UNFIT		
4		FIT / UNFIT		
5		FIT / UNFIT		

### WEIGHT RECORD

SR. NO.	DATE	WEIGHT	REMARK	T.O. SIGN
1				
2				
3				
4				
5				

NOTE: PRINT YOUR NAME IN CAPTIAL LETTERS ONLY




**BOXER NAME:**

**UNIT:**

**Boxer Bout Record**

SR. NO	Date	Name of the Opponent Boxer	Oppo. Unit	Decision	Result	Remarks	T.O. Sign



**BOXER NAME:**

**UNIT:**

**Boxer Bout Record**

SR. NO	Date	Name of the Opponent Boxer	Oppo. Unit	Decision	Result	Remarks	T.O. Sign