



**Boxing, Martial Arts, and Professional Wrestling Program
 BOXER FEDERAL IDENTIFICATION CARD**

Fee \$40.00

A check or money order payable to the **TREASURER OF VIRGINIA**,
 or a completed [credit card insert](#) must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

Select the **one** method you are requesting:

| | | |
|--------------------------|--|-------|
| X | Identification Card Type: | Trans |
| <input type="checkbox"/> | Initial/First Virginia Boxer Federal ID Card | 1020 |
| <input type="checkbox"/> | Renewal prior to Expiration | 2020 |
| <input type="checkbox"/> | Re-Issue of Expired Boxer Federal ID Card | 1020 |

- No professional boxer is permitted to participate in a boxing event without first presenting a valid Boxer Federal Identification Card.
- Boxers must apply for a Boxer Federal Identification Card in the state in which he/she is resident or, in the case of a boxer who is a resident of a foreign country, the Commission of any state that has such a commission.
- Please include the following:
 - If not a foreign resident, clear photocopy of two (2) of the following government issued IDs, one of which must contain a photograph:
 - State driver's license Social Security card State identification card Birth Certificate
 - If a foreign resident, clear photocopy of foreign passport
 - Two (2) passport photos
 - Copy of previous Boxer Federal Identification Card (*For renewal only*)
 - Association of Boxing Commissions' Federal Identification Card Application (page 2 of this application)
 - \$40 processing fee

"Health and Safety Disclosure"

As per the Muhammad Ali Boxing Reform Act (federal law), each commission must present to every professional boxer, a medical disclosure upon issuance of a Federal Identification Card.

As a professional boxer you should be aware that this sport includes many health and safety risks, particularly the risk of brain injury. Therefore, it is strongly recommended that a professional boxer undergo the necessary medical exams that detect brain injury. If you need further information about these exams, please contact the Commonwealth of Virginia; Boxing, Martial Arts, and Professional Wrestling Advisory Board or your local boxing commission.

I affirm that I understand the above statement.

Print Name _____

Signature of Boxer _____ Date _____

| | | | | | | | |
|-----------------------|-----------------|-----|------------|----------|------------------|-----------------|--|
| OFFICE USE ONLY | Passport ID No. | | | Country | | Expiration Date | |
| | DATE | FEE | TRANS CODE | ENTITY # | FILE #/LICENSE # | ISSUE DATE | |
| OFFICE USE ONLY | | | | | 4111 | | |



ASSOCIATION OF BOXING COMMISSIONS (ABC)

Boxer's Federal Identification Card Application

FEDERAL ID# _____ EXPIRATION DATE _____

FULL NAME
First _____ Middle _____ Last _____

DATE OF BIRTH _____ SOCIAL SECURITY _____ - _____ - _____
MONTH / DAY / YEAR

PLACE OF BIRTH
Country _____ City _____ State _____

ADDRESS
Street _____ City _____ Country _____

State _____ Zip Code _____ Phone Number _____ E-mail _____

HEIGHT: _____ WEIGHT: _____ STANCE (check only 1): RIGHT LEFT

HAIR COLOR: _____ EYE COLOR: _____

DISTINGUISHING CHARACTERISTICS: (Tattoos, scars, etc.)

MANAGER:
Name _____ Email or Phone Number _____

PROMOTER:
Name _____ Email or Phone Number _____

TRAINER:
Name _____ Email or Phone Number _____

AMATEUR EXPERIENCE: Yes No RECORD _____

TERMS AND CONDITIONS

- Boxers must apply for Boxer Federal ID card in the state in which he/she is a resident.
- Boxer Federal ID card will not be issued unless an accurate and truthful completed application for ABC Boxer Federal ID Card, **two passport photos and two forms of ID.**
- Boxer understands that he/she will not be allowed to fight without a Boxer Federal ID Card.
- Any false or misleading statements on this application may result in the Boxer being placed on the National Suspension list.
- The ABC reserves the right to amend these terms and conditions.
- Boxer understands that the ABC with the cooperation with the Boxing Commission that issued the Federal ID Card will settle any disputes or violations of terms and conditions for these cards.
- Boxer agrees to abide by these terms and conditions and any other rules set forth by the ABC and the Boxing Commission that issued the identification card.

I solemnly swear (or affirm) that the statements made on this application are true and the photograph attached is a true likeness of me. By signing this application I agree to be bound by the rules and regulations of the ABC. If I make a false or misleading statement in this application the ABC at any time thereafter may place me on suspension for one year. I acknowledge that I have read, understand, and agree to the terms and conditions of the ABC Boxer Federal Identification Card.

Applicant's Signature _____ Date _____ Commission Signature _____ Date _____