

CALIFORNIA STATE ATHLETIC COMMISSION

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Website: www.dca.ca.gov/csac Email:CSAC@dca.ca.gov



Pro Debut Participant Information Sheet

This form may ONLY be completed by a licensed Professional Trainer per Business and Professions Code Section 18653: No person shall train a professional boxer or kickboxer or martial arts athlete unless he or she has been licensed by the commission. A professional trainer is someone who is responsible for the day-to-day training of those athletes and possesses a minimum of five years experience in combative sports. Only licensed professional trainers may make a recommendation to the commission on whether a contestant is prepared for his or her first amateur bout or to turn professional.

Participant:	Age:	Height:	Male or Female:		
Has the participant trained with th If NO , with whom else did the par	• • •			Yes No	
Weight as an amateur: Weight for the proposed bout:	Weight at start o	of training:	Weight today Length of training:	:	
Describe what type of training the Please use back of page if neces		preparation fo	or this bout: Be detaile	d in your descrip	tion.
Cardiovascular (explain): Bag work (explain): Sparring (explain- include numbe session):	r of rounds and duration o	of rounds, who	sparred with and wher	n was the last spa	 rring
Other:					
Did the participant suffer any injui If YES , please explain in detail. (Unecessary):	Jse back of page if			-	
Amateur Boxing		io paocioon	Amateur Martial Arts I	Record	
Wins:Wins by KO/TK0				lartial Arts	
Losses:Losses by KO/Ti	<o:< td=""><td>Wins:</td><td></td><td></td><td></td></o:<>	Wins:			
	Wins by KO/TKO/Submissions:				
		Losses:	Losses by KO/TKO/S	Submissions:	

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Partic	ipant Name:	
•		
If the participant's previous experience i	is in amateur boxing please detail	their exact experience:
# of Junior Olympic bouts:	# of Novice bouts:	# of Open bouts:
		pete in combative sports to include providing
·		anization such as USA Boxing, CAMO, or and when the participant last competed:
Additional relevant information:		
CHECK WITH THE COMMISSION IF	IRED TO UNDERGO AN ATHLE THIS WILL APPLY TO YOU. IF T CENSING PROCESS <u>PRIOR</u> TO	THIS IS REQUIRED YOU MUST UNDERGO
If the participant was a member of an or organization please provide a copy of the	= -	zation such as USA Boxing or similar
If a copy of the passbook or record book by the Commission. Contact the Comm		ete this form until you are authorized to do so
I declare under penalty of perjury under	t all the answers and information	, that I have read the foregoing Pro Debut given are my own. I further declare that all
Participant:		
Printed Name	Signature	Date
Pro Trainer:Printed Name	Signature	 Date

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