



2017 IMPERIUM CUP



ENTRY FORM

PLEASE COMPLETE IN CLEAR BLOCK LETTERS

CLUB/TEAM: _____

Boxer's Name	Gender	Date of Birth (MM/DD/YYYY)	Weight (kg)	No of Bouts (Bouts/Won/Lost)

NAME OF TEAM MANAGER / HEAD COACH: _____

Shirt size: small medium large x-large xx-large

Mobile Tel number: _____

Email address: _____

Other coach registration:

Shirt size: small medium large x-large xx-large

Shirt size: small medium large x-large xx-large

Shirt size: small medium large x-large xx-large

Shirt size: small medium large x-large xx-large

PAYEMENT METHOD

1) Credit card Visa MasterCard

Exp.: _____ Verification code: _____

Name on credit card: _____

Credit card number: _____

Signature of person making payment

2) Cheque made payable to : Club de Boxe L'Imperium

PLEASE SEND THE COMPLETED ENTRY FORM ALONG WITH PAYMENT

Hotel selected: The Finlandais Super 8 L'Imperia

BY MAIL (cheque or credit card)

CITÉ DU SPORT

A/s Club de Boxe L'Imperium

2485, boul. des Entreprises, Local A-184

Terrebonne (Qc) J6X 4J9

BY E-MAIL (credit card)

info@coupeimperium.com

*** YOUR ENTRY SHEET MUST BE ACCOMPANIED BY THE PAYMENT TO BE OFFICIAL ***