19 - 29, October 2022

Maribor, Slovenia

Version 2.0

* IBA reserves the right to update this Handbook as and when required.

* This Handbook must be read in conjunction with the IBA Technical and Competition Rules.

MARIBOR, SLOVENIA 2022



Umar Kremlev

IBA President

Dear IBA Family,

This is a pleasure for me to present to you the first Silver Belt Series tournament in Maribor, Slovenia, which is a part of the brand-new IBA competition, the World Boxing Tour (WBT).

This Silver Belt Series competition in Slovenia is a historical moment for the whole IBA Family. With this first tournament, we launch a series of high-level events all around the globe.

The WBT is a new milestone on our way towards IBA's main goal to create the best conditions for athletes and coaches around the world. The World Boxing Tour will create new opportunities for boxers on all continents to compete and improve their level.

IBA gives its gratitude to the Slovenian Boxing Federation for hosting this historical WBT Silver Belt Series tournament. We appreciate your efforts towards the success of this event in Maribor.

I wish our athletes to show their best in Maribor and the following WBT events!

Sincerely yours,

Umar Kremley





MARIBOR, SLOVENIA 2022



Robert Reher

President of Slovenian Boxing Association

Dear boxing family,

I am honored to invite you to an event that will go down in history. I cordially invite you to the first Silver Belt Tournament of the World Boxing Tour.

The Slovenian Boxing Federation is one of the smallest federations in the world. For many years, our federation was stagnant and not making any progress, but everything turned around when I took over as President. Last year, we successfully organized the international tournament Maribor Cup with a prize fund of €100,000. In order to develop, cooperate and take boxing to an even higher level, we have decided to organize a big tournament again this year. It turned out to be a very important tournament, as it will be the first of the World Boxing Tour (WBT). We are proud, honored, and excited that the first Silver Belt Tournament of the World Boxing Tour will take place in Maribor, Slovenia and to have been entrusted by the IBA with the responsibility of being the first organizers of the event.

Every day, our team and I work hard to ensure that the event is organized to the highest possible standard, that you and your teams feel at home, that you get to know Slovenian culture and, above all, that you get to showcase the talent that you work for every day.

I would like to express my utmost gratitude to the IBA for their trust and help organizing this superb and wonderful event.

Yours sincerely,

Robert Reher





MARIBOR, SLOVENIA 2022

CONTENT

1.	ORGANISER	5			
2.	CONTACTS				
3.	3. COVID – 19 PROTOCOL				
4.	COMPETITION	6			
4.1	1 FORMAT	6			
4.2	2 Sports Entries Check	7			
5.	EVENT SCHEDULE	9			
6.	REGISTRATIONS	10			
6.1	1 Participating Boxers	10			
6.2	2 Coaches	10			
6.3	3 Team Officials	10			
6.4	Extra Team Officials & National Federation Representatives	11			
6.5	5 Process and deadlines	12			
7.	VISA & ENTRY REQUIREMENTS	13			
7.1	1 Contacts	13			
7.2	2 Process	13			
8.	TRANSPORTATION	14			
8.1	1 International Transportation	14			
8.2	2 Local Transportation	14			
9.	ACCOMMODATION	15			
9.1	1 Team Delegation's Hotels	15			
9.2	2 EXTRA OFFICIALS	18			
9.3	3 IBA OFFICIALS AND IBA STAFF	19			
9.4	4 VIP Guests Hotel	20			
9.5	5 Payment conditions	21			
10.	COMPETITION AND TRAINING VENUE	22			
11.	ACCREDITATIONS	23			
11	.1 For Team Delegation Members	23			
11	.2 For Extra Team Officials and NF Representatives	23			
11	.3 For Media and Press	23			
12.	TECHNICAL VIDEO RECORDING	23			
13.	IMAGE RIGHTS	24			
14.	DOPING CONTROL	24			
15.	MEDICAL CARE AND INSURANCE	24			
16.	16. AWARDS				
17.	HOST CITY - MARIBOR	25			
18.	SPORT ENTRY CHECK DOCUMENTS	27			





MARIBOR, SLOVENIA 2022

1. ORGANISER

The Slovenian Boxing Association, affiliated with IBA, has been entrusted with the organization of the Silver Belt Tournament, Maribor, 2022.

2. CONTACTS

SUBJECT	E - MAIL
Registrations for Team Delegations	database@iba.sport
Registrations for Extra Officials	<u>database@iba.sport</u>
Visa Support	silverbeltmaribor.visa@gmail.com
Competition related	sport@iba.sport
Accommodation	silverbeltmaribor.accommodation@gmail.com
Transport	silverbeltmaribor.transport@gmail.com
General info	silverbeltmaribor@gmail.com

3. COVID – 19 PROTOCOL

According to the current Covid-19 situation in Maribor, Slovenia at the time of the Tournament there will be an update regarding all the requirements and protocols to be followed:

- ✓ Each Participant needs to be healthy and without any Covid-19 symptoms while participating,
- ✓ If any Participant notice any symptoms, they are obligated to alert staff and get tested,
- ✓ Each Participant must have a PCR test (test should not be older than 72 hours and it must be in English), vaccination also applies,
- ✓ If any Participant needs PCR or rapid antigen test to enter home country, please give us at least 5 days' notice before departure,
- ✓ For full details and updates on Covid-19, please visit the Official Website.





MARIBOR, SLOVENIA 2022

4. COMPETITION

4.1 FORMAT

The Tournament will be organized based on the IBA Technical and Competition Rules.

Please take a look at the weight categories:

MEN

Weight Category	over Kg	to Kg
Minimumweight	46	48
Flyweight	48	51
Bantamweight	51	54
Featherweight	54	57
Lightweight	57	60
Light Welterweight	60	63.5
Welterweight	63.5	67
Light Middleweight	67	71
Middleweight	71	75
Light Heavyweight	75	80
Cruiserweight	80	86
Heavyweight	86	92
Super Heavyweight	92	-

WOMEN

Weight Category	over Kg	to Kg
Minimumweight	45	48
Light Flyweight	48	50
Flyweight	50	52
Bantamweight	52	54
Featherweight	54	57
Lightweight	57	60
Light Welterweight	60	63
Welterweight	63	66
Light Middleweight	66	70
Middleweight	70	75
Light Heavyweight	75	81
Heavyweight	81	-





MARIBOR, SLOVENIA 2022

- ✓ The Bout Review Rule (IBA Technical & Competition Rule no. 20) will not be applied,
- ✓ The Official Draw will be conducted by Swiss Timing through and electronic draw,
- ✓ Two rings will be used until the semi finals phase,
- ✓ Medals will be distributed fort he first 4 boxers of each weigh category (1 Gold, 1 Silver, 2 Bronze),
- ✓ The Technical Delegate of the event is TO BE ANNOUNCED,
- ✓ The Evenet will be officiated by IBA International Technical Officials and IBA 3
 Star certified Referees and Judges, all appointed by IBA.

4.2 Sports Entries Check

The Sport Entries Check will take place on 18th and 19th October 2022. Teams will be informed of the exact date and time of their appointment during accreditation after arrival. Please make sure to arrive in Maribor, Slovenia on 18th October or prior to 19th October 2022.

Each Team delegation can appoint a maximum of 2 persons to attend the Sport Entries Check. IBA recommends to each team to send the Team Manager and/or the Team Doctor and/or the Head Coach.

Each Team Delegation's representatives will have a 10-minute appointment with IBA Officials to confirm the entry list of their delegation, the spelling of boxers' names, the uniforms, national flag, and anthem and to present the official documents listed below to IBA.

Your representative(s) must present:

- 1. Entry list of the delegation,
- 2. Passports of each boxer,
- 3. Record Books of each boxer,
- 4. Boxer's uniform examples,
- 5. Results of Hepatitis B, Hepatitis C and HIV tests, not older than 6 months,
- 6. IBA General Participation Form,
- 7. IBA Medical certificates issued within the last 30 days for each boxer,
- 8. COVID-19 Declaration of No symptoms Form signed by all team members,
- 9. Anti-doping consent forms signed by each of the boxers,
- 10. Video consent form signed by team manager/head coach.
- 11.IBA Fit to Box Form
- 12. Declaration of non-pregnancy





MARIBOR, SLOVENIA 2022

Nb. All forms will be provided to all National Federations

<u>Important</u>: Please note that the presence of your representative is mandatory. In the event where Team Delegation Representatives do not show-up to the scheduled appointment, the entire Team will be disqualified. **ALL MEDICAL DOCUMENTS MUST BE PRESENTED**





MARIBOR, SLOVENIA 2022

5. EVENT SCHEDULE

Event	Time	Place			
Arrivals	18 th and 19 th October, all day	Teams Hotel			
October 18 to October 29	October 18 to October 29				
Accreditation Centre	08:00 - 12:00 13:30 - 19:00	Teams Hotel Competition Venue			
October 19					
Sport Entries Check	07:00 – 13:00	Teams Hotel Pohorje Village			
Technical Meeting	16:00 – 17:00	Teams Hotel Pohorje Village			
Official Draw	17:00 – 18:00	Teams Hotel Pohorje Village			
Opening Ceremony	19:30 – 21:00	Competition Venue			
Welcome Dinner (Officials, NF Representatives)	21:00 – 22:30	Solemn Arena Hall			
October 20 – October 26					
Daily Weigh - in	08:00 – 09:00	Team Hotel – TBD			
Preliminaries/Quarterfinal s	Session 1 14:00 Session 2 18:00	Competition Venue			
October 27	October 27				
Semi - finals	Session 1 14:00 Session 2 18:00	Competition Venue			
October 28 (change to 1 r	October 28 (change to 1 ring)				
REST DAY	/	/			
October 29					
Finals and Medal Ceremonies	Session 1 13:00-17:00 Session 2 17:30-21:30	Competition Venue			
Farewell Dinner	21:30 – 23:00	Solemn Arena Hall			
October 30					
Departures	1	/			





MARIBOR, SLOVENIA 2022

6. REGISTRATIONS

6.1 Participating Boxers

AGE ELIGIBILITY: Boxers born from January 01, 1982 to December 31, 2003

Each NF is invited to register up to one (1) Boxer in each weight category, as per IBA Technical and Competition Rules. All registrations need to be done through the IBA database (https://iba-database.sport/nf).

6.2 Coaches

Each Boxer will be entitled to be accompanied to the ring by up to three (3) Coaches. However, obly two (2) Coaches may mount the apron of the ring and only one (1) may enter the ring.

- All Boxers must be accompanied by at least one (1) IBA Certified Coach (1, 2, or 3 Star) at ringside during the bouts,
- All Coaches allowed to work in the Filed of Play (FOP) must be IBA Certified (1, 2 or 3 Star),
- One of the three (3) Coaches can be replaced by an IBA Certified Team Cutman.
- **IMPORTANT:** If your team does not have any IBA Certified Coach, please raise this at the Technical Meeting so arrangments can be made with another team.

6.3 Team Officials

Each Team Delegation can have the following number of Team Officials:

- √ 1 Team Manager,
- √ 1 Team Doctor,
- ✓ 1 Physiotherapist,
- ✓ 1 IBA Certified Team Cutman,
- ✓ Number of Coaches according to the table below:
 - 1-3 Boxers: Up to 3 Coaches,





MARIBOR, SLOVENIA 2022

- 4 – 8 Boxers: Up to 6 Coaches,

- 9 – 13 Boxers: Up to 8 Coaches,

- 13 – 25 Boxers: Up to 10 Coaches.

6.4 Extra Team Officials & National Federation Representatives

Any individual who will be at the event in addition to the ones outlined in point 4.2, whom the National Federation (NF) would like to send to work with the team, would be registered as an Extra Team Official.

Extra Team Official who do not have any direct link with the preparation of the team fort he competition will not receive an accreditation.

Extra Team Officials

 National Coach of a registered Boxer, Additional Physiotherapist, Additional Doctor, Nutritionist.

NF Representatives

- Each NF can register up to a total of 6 additional persons within the 2 categories below. All Extra Team Officials and NF Representatives registrations must be done through IBA database in the dedicated section of the event.
- IMPORTANT: In the event where one of your representatives has special security needs (personal security), please make sure to contact LOC at <u>silverbeltmaribor@gmail.com</u> to arrange access, accreditation, and entry into Slovenia in accordance with local authorities.

Any inidividual attending the event as a representative of the NF, such as:

- NF President,
- NF Secretary General,
- NF Executive Board Member,
- NF President's Entourage,
- NF Administrative Staff.





MARIBOR, SLOVENIA 2022

6.5 Process and deadlines

All registrations for Team Delegations will have to be made through the IBA database (https://iba-database.sport/nf).

Please find the summary below:

REGISTRATION FOR:	DONE BY:	REGISTRATION PERIOD:
BOXERS	Web registration on the IBA database	7 - 23 SEPTEMBER, 2022 (23:59 GMT)
TEAMS OFFICIALS	Web registration on the IBA database	7 - 23 SEPTEMBER, 2022 (23:59 GMT)
EXTRA TEAM OFFICIALS	Web registration on the IBA database ("Extra Officials" section)	7 - 23 SEPTEMBER, 2022 (23:59 GMT)
ARRIVAL/DEPARTURE OF THE DELEGATION	Web registration on the IBA database ("Travel Details" section)	7 - 23 SEPTEMBER, 2022 (23:59 GMT)
ROOMING LIST	Web registration on the IBA database ("Room Request" section)	7- 23 SEPTEMBER, 2022 (23:59 GMT)





MARIBOR, SLOVENIA 2022

7. VISA & ENTRY REQUIREMENTS

The Organiser will provide assistance regarding visas if required.

7.1 Contacts

For all information, please contact:

- E-mail: silverbeltmaribor.visa@gmail.com
- Contact Person: Patricija Reher

7.2 Process

The process for obtaining a visa for Slovenia will be as follows:

- Team Delegations who need Visa must immediately request it at the Slovenian Embassy/Consulate of their country (with all the necessary documents),
- Team Delegations from Schengen countries do not need Visa to travel to Slovenia.
- For general information, please look on the official website (https://www.gov.si/teme/vstop-in-prebivanje/#e37161)

The deadline to request assistance is 28th September 2022.

Subsequently, you will receive an invitation letter which is necessary to request the Visa.





MARIBOR, SLOVENIA 2022

8. TRANSPORTATION

8.1 International Transportation

All travel information related to the Team Delegation must be entered in the IBA Database during the registration and additionally sent to the LOC at <u>silverbeltmaribor@gmail.com</u>.

The airport of arrival and departure will be:

- ✓ Jože Pučnik Airport Ljubljana,
- ✓ Graz Airport.

Deadline to submit arrival and departure information: 05th October 2022.

8.2 Local Transportation

Local transportation will be provided by the organizers:

- ✓ To and from Jože Pučnik Ljubljana Airport and Graz Airport,
- ✓ To the foothills of the Pohorje where the Hotel is located (with cable car),
- ✓ From the foothills of Pohorje to the Competition and Training Venue,
- ✓ To and from the Hotel for Opening Ceremony.





MARIBOR, SLOVENIA 2022

9. ACCOMMODATION

Team Delegation's Hotels

Members of Team Delegations and Team Delegations' Staff who have «Extra Team Official» accreditation, such as National Coaches, additional Doctors/Physiotherapists, and Nutritionists can stay at the Team Delegations' Hotels.

IMPORTANT: NF Representatives cannot stay at Teams Delegations' Hotels.



ACCOMODATION:

- Forest Hotel Videc***
- Forest Apartments Videc***

- Wellness & Spa Hotel Bolfenk****
- Wellness & Spa Family Apartments Bolfenk****

ROOMS / APARTMENTS ***	FULL BOARD / Person / Day
1/1 room	90,00 €
1/2 room	75,00 €
1/3 ali 1/4 rooms	65,00 €
Apartments for (2 pax, 3 pax, 6 pax, 8 pax, 10 pax)	65,00 €

ROOMS / APARTMENTS ****	FULL BOARD / Person / Day
1/1 room	100,00 €
1/2 room	85,00 €
1/3 ali 1/4 rooms	75,00 €
Apartments for (2 pax, 3 pax, 6 pax, 8 pax, 10 pax)	75,00 €





MARIBOR, SLOVENIA 2022

FOREST HOTEL VIDEC*** AND FOREST APARTMENTS VIDEC***

Adress: Hočko Pohorje 133, 2208 Pohorje, Slovenia







MARIBOR, SLOVENIA 2022

WELLNESS & SPA HOTEL BOLFENK**** AND WELLNESS & SPA FAMILY APARTMENTS BOLFENK****

Adress: Hočko Pohorje 133, 2208 Pohorje, Slovenia





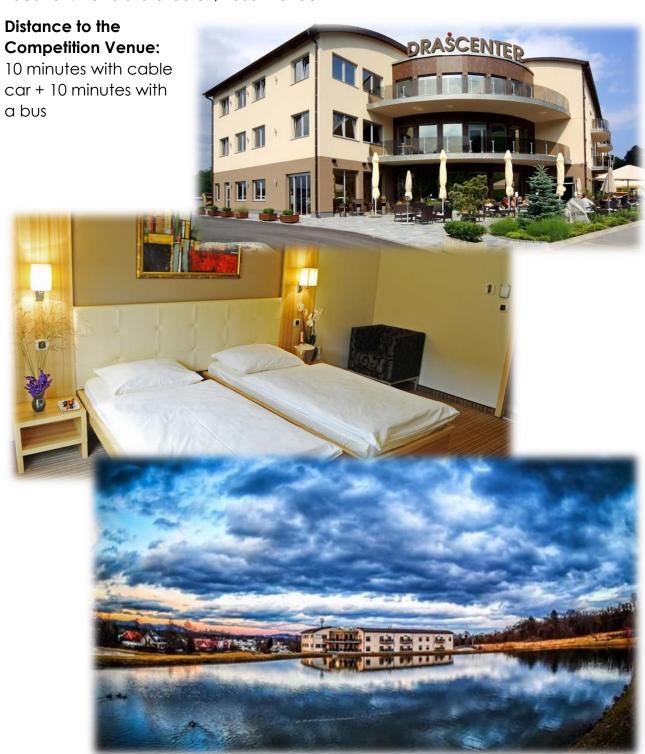


MARIBOR, SLOVENIA 2022

9.2 EXTRA OFFICIALS

DRAŠ HOTEL****

Location: Pohorska ulica 57, 2000 Maribor







MARIBOR, SLOVENIA 2022

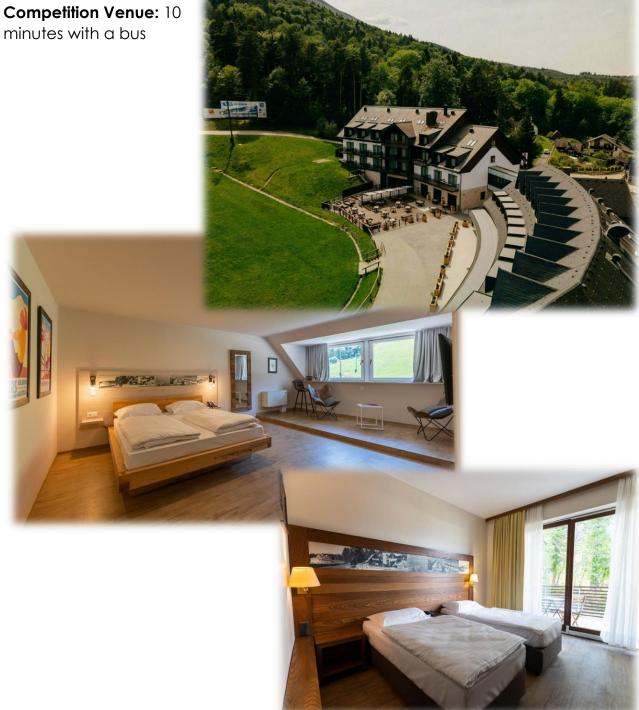
9.3 IBA OFFICIALS AND IBA STAFF

HOTEL ARENA***

Adress: Pot k Mlinu, 2000 Maribor

Distance to the

minutes with a bus





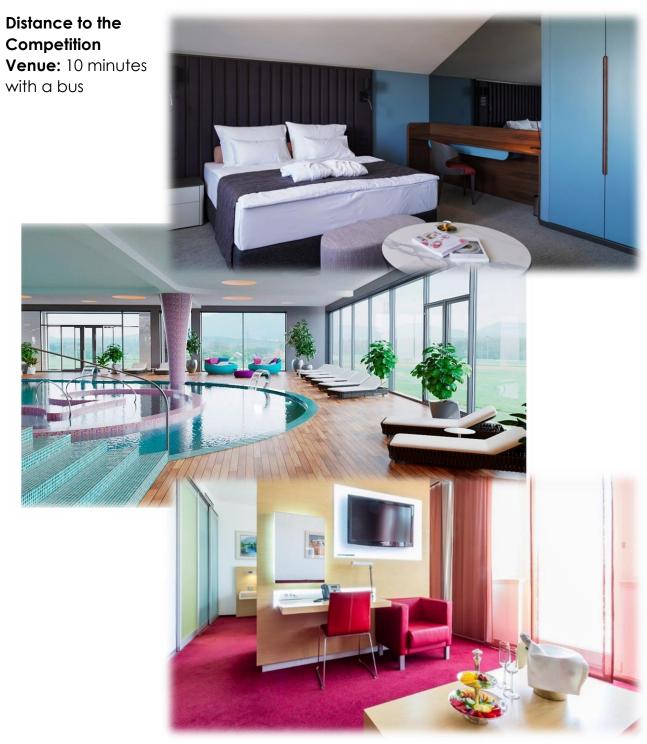


MARIBOR, SLOVENIA 2022

9.4 VIP Guests Hotel

VIP HOTEL – HOTEL HABAKUK*****

Adress: Pohorska ulica 54, 2000 Maribor







MARIBOR, SLOVENIA 2022

9.5 Payment conditions

All Team Delegations must pay their full room charges as above for the entire Tournament period by 5th of October

Team Delegations are requested to submit their choice and needs through IBA Database and on e-mail <u>silverbeltmaribor.accommodation@gmail.com</u> before the **28th of September**

BANK INFORMATION

Bank name: SKB banka d.d. Ljubljana

Beneficary: Boksarska zveza Slovenije

Swift Code: SKBASI2X

IBAN: SI56 0312 1100 0204 968

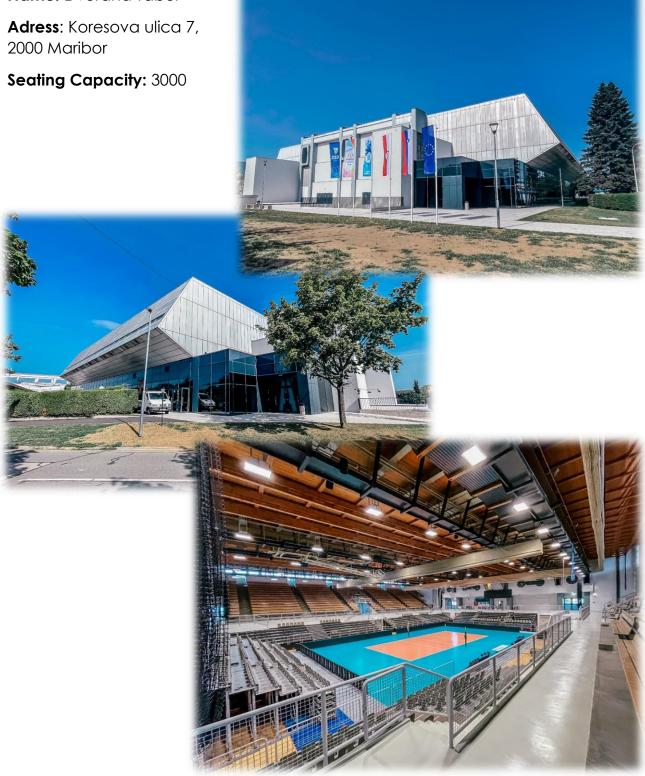




MARIBOR, SLOVENIA 2022

10. COMPETITION AND TRAINING VENUE

Name: Dvorana Tabor







MARIBOR, SLOVENIA 2022

11. ACCREDITATIONS

11.1 For Team Delegation Members

- ✓ All Team Delegation members registered for the event through the IBA Database within the deadline will receive their accreditations on site after the LOC has approved the accommodation payment,
- ✓ Accreditations will be given out only upon presentation of a passport,
- ✓ The Accreditation Center will be located at the Teams Hotel and at the Venue.

11.2 For Extra Team Officials and NF Representatives

Each National Federation can request up to six (6) additional accreditations for its internal needs by filling out the dedicated section in the IBA Database no later than 28th of September.

11.3 For Media and Press

International Media

For accreditation, please contact silverbeltmaribor@gmail.com

Local Media

For accreditation, please contact silverbeltmaribor@gmail.com

12. TECHNICAL VIDEO RECORDING

Each National Federation will be allowed to record the bout of their boxers with up to one camera per ring. Two specific locations in the stands will be reserved for these technical areas. Recordings are for technical purposes





MARIBOR, SLOVENIA 2022

only and not for public broadcasting, social media included. The access to the two technical video recording areas will be conditioned to the signature of a disclaimer in this regard. You will find it attached at the end of this Handbook. The team manager of each National federation must bring the signed copy to the Sport Entries Check.

13. IMAGE RIGHTS

IBA has appointed an IBA photographer to promote the image of boxers during the WBT Silver Belt Tournament Maribor. By participating in the Tournament, each Boxer agrees to release their image rights to IBA for promotional purposes.

14. DOPING CONTROL

Anti-doping controls will be conducted in accordance with the IBA Anti-Doping Rules and the World Anti-Doping Code. We want to remind you that according to WADA regulations, from 2016, blood testing may be conducted during IBA Competitions.

15. MEDICAL CARE AND INSURANCE

- ✓ The LOC will provide medical care and first-aid during the entire Tournament
 Period to any participant who suffers from a sports injury contracted during
 the Tournament.
- ✓ All participants are requested to get their own travel and medical insurance as the LOC will provide liability insurance for all participants only at the Competition Venue.

16. AWARDS

Medals and trophies will be awarded after the last finals ceremony.





MARIBOR, SLOVENIA 2022

17. HOST CITY - MARIBOR

At all levels, Maribor tells a rich story about the intertwining of creativity, knowledge and orientation towards progress; about an environment where those who create and live in it feel good.





Maribor lies at the intersection of two natural routes: the first is the Drava river, which divides the city into northern and southern parts, the second, the meridian direction, is a transit route across the Drava from the Graška basin to the Celjska basin. The road and railway through Maribor connect Central and Southeastern Europe.

Thanks to its high-quality infrastructure, integration into the logistics network and excellent geolocation, which places it in the very center of Europe, Maribor is a first-class business environment for developing or upgrading business opportunities.

Like Slovenia, which is known in the world as a green country, Maribor is also a place that is sustainable and offers opportunities for balanced business and leisure time. It is an example of coexistence with nature, sustainability and the direction of responsibility towards the most valuable that the environment provides. Doing business in Maribor therefore also means being in contact with the authentic nature that surrounds the city and its surroundings.





MARIBOR, SLOVENIA 2022

Maribor is a place with a long historical tradition, with countless pieces of life from the past and cultural tradition, which spreads out before those who come into contact with it like an endless museum.

TOP 5 ATTRACTIONS







MARIBOR, SLOVENIA 2022

18. SPORT ENTRY CHECK DOCUMENTS

In the upcoming pages, please find the required documents to be filled out and presented at the Sport Entry Check.







REGISTRATION FORM IBA WORLD BOXING TOUR SILVER BELT SERIES MARIBOR, SLOVENIA, 2022

Federation:	
Name of Participant:	
Date of Birth & Age:	(dd)/(mm)/(yyyy) Age:
Nationality:	
Sex:	Passport No.:
Role of Participant:	

* Athlete * Team Manager * Coach * Doctor * Observer

I. REGISTRATION

I, the undersigned, knowingly and without duress, do voluntarily submit my Entry to the IBA World Boxing Tour Silver Belt Series, Maribor, Slovenia, 2022 (hereafter the "Championships"). The IBA World Boxing Tour Silver Belt Series, Maribor, Slovenia, 2022 is hosted by the International Boxing Association (IBA) and organised by the Slovenian Boxing Federation (SBF), hereafter collectively referred to as the "Organizing Committee".

II. SUBMISSION TO IBA REGULATIONS AND THE JURISDICTION OF THE CAS

In consideration of the Organizing Committee accepting my application, I agree to abide by and follow all Regulations and Rules established by IBA and SBF.

I understand that any dispute, controversy or claim arising out of or in connection with the Championships and not resolved after the exhaustion of the legal remedies set forth by IBA, my National Federation, and/or the SBF shall be exclusively submitted to the Court of Arbitration for Sport (CAS), Lausanne, Switzerland, in accordance with IBA Regulations and Constitution, except for "field-of-play" decisions, which cannot be subject to any appeal to CAS. Recourses to State Courts are expressly prohibited.

III. WAIVER OF LIABILITIES

I hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the Championships. Acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release the Organizing Committee, its officers, agents, representatives, volunteers, judges and referees and other related members

from all claims, actions, suits, and controversies at law or in equity by reason of any matter, cause or thing whatsoever that I may sustain as a result of or in connection with my participation in the Championships. I fully understand that all medical attention or treatment afforded to me by the Organizing Committee, its officers, medical personnel, representatives, volunteers, and all other related members will be of the first aid type only, and hereby release the Organizing Committee its officers, representatives, volunteers, and all other related members from any liability for such aid. I understand it is my obligation to obtain my own medical coverage.

IV. IMAGE RIGHTS

I agree that my performance, attendance, and participation at the Championships may be filmed or otherwise recorded or released or telecast live. I consent to allow the Organizing Committee to use of my name, address, voices, poses, pictures and biographical data concerning full or parts, in any form or language, with or without other material, throughout the world, without limitation, for television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised and I do hereby waive any compensation in regard there of as well as any future rights to the aforementioned.

V. DATA PROTECTION

I acknowledge that the Organizing Committee, and any third parties contracted by them, may collect, store, process, use and disclose to third parties any personal information including, but not limited to my name, date of birth, contact details, image, historical and statistical data related to my affiliation, as well as to my participation, in any capacity, in these Championships, to the extent necessary or helpful to the organisation of the event. The Organizing Committee may create and update my personal data in any other way in which I have provided or will provide my express consent or as may be required by law.

I am aware that I can ask to have access to any of my personal data and that I am entitled to request their rectification to correspond to the truth. I have been duly informed and understand that the Organizing Committee may disclose personal information to third parties where such disclosures are required by law, informational purposes or deemed otherwise necessary. I am also entitled to object and refuse at any time the processing of my personal data, as described above, by written and signed communication sent to IBA, bearing in mind that such refusal may affect my participation in IBA competitions. I can request that all my personal data collected by the Organizing Committee be erased, notably if and when such personal information is no longer relevant.

VI. OTHER FORMS

Signature of Participant

Antidoping consent form (Boxers)

As a condition of my participation in the Championships, I have taken due note, and I agree to sign the following mandatory forms exhibited on this application form:

B)	Medical certificate (Boxers)	
C)	Declaration of Non-Pregnancy (Female Boxers)	
D)	COVID-19 forms (two) (All participants)	
E)	IBA World Boxing Tour Silver Belt Series, Maribor, Slovenia, 2022 Code of Conduct (All participants)	
F)	Declaration of Fit to Box (Boxers)	
Anyo	one willing to record the bouts for technical purposes only will be required to fill in the following additional for	m:
F)	Technical video recording agreement (One per team)	
hav	re read and fully understand this form and its exhibits, including the arbitration clause and waivers listed above	! .
Nam	e of Participant	ate





IBA MEDICAL CERTIFICATE

	—— Athlete	
NAME:		
DATE OF BIRTH:		
SIGNATURE:	DAT	E:
	Doctor	
NAME:		
TITLE/POSITION:		
ADDRESS:		
SIGNATURE:		DATE:
STAMP		
COMMENTS:		
	Fit to Box	
	Not Fit to Box	ä





QUESTION FOR ATHLETE: IF YES, EXPLAIN 1. Is a Doctor currently treating you for anything? 2. Have you ever been unconscious or had a concussion? 3. Have you been hit hard in the head in the last 6 weeks? Have you had any headaches in the last 2 weeks? 4. Do you have any problem with bleeding? 5. Do you have a history of hepatitis B or hepatitis C, or HIV infection? 6. 7. Does any disease run in your family? Sudden unexpected deaths? 8. Have you had any surgery? Have you ever had to stay in a hospital? 9. 10. Do you have any medical condition?

Doctor's Stamp:





ME	DICAL CERTIFICATE			ABNORMALITIES
If Athlete had a Concussion in the past year, please certify that:	Medical Examination following rest period after Concussion was normal Athlete Fit To Box	Normal	Abnormal	
General Medical Exam	List abnormalities not covered in specific system exams below:			
Mental Status/ Psychological	Brief survey	Normal	Abnormal	
	Cranial nerves, eyes, pupil size and reactivity, Fundi, vision by chart (record)	Normal	Abnormal	
Head	Mouth, teeth, throat	Normal	Abnormal	
	Ears	Normal	Abnormal	
	Temporomandibular joint	Normal	Abnormal	
Neck	Cervical spine, lymph nodes	Normal	Abnormal	
Chest	Breath sounds, rib tenderness on compression	Normal	Abnormal	
	Pulse/blood pressure (record)	Normal	Abnormal	
Cardio Vascular System	Heart examination: sounds, murmurs, heaves, size, rhythm	Normal	Abnormal	
Orthopedic System	Upper limb: shoulder, wrist, hand, fingers	Normal	Abnormal	
	Lower limb: foot, ankle, knee, hip	Normal	Abnormal	
	Reflexes	Normal	Abnormal	
Neurological System	Verbal Responses	Normal	Abnormal	
	Motor responses and balance	Normal	Abnormal	
Allergies	(record)	Yes	No	
Allergies	Type of reaction (record)			
Medications used Name and dosage (record)		Yes	No	
Any TUE Submitted ? No			Yes (If YI	ES, please explain):
Doctor's Stamp:				





DECLARATION OF FIT TO BOX FORM

Last Name:	First Name:		Country:		
Date of Birth:	Age:		Mobile no:		
ANSWER ALL QUESTIONS					
Have you ever been admitted to Have you had medical treatment f		ast 3 months?		Yes Yes	No No
Have you suffered from any of t	he following?				
Any eye disorders or operations (including laser eye surgery)? Any broken bones or cuts needing treatment in the previous 6 months? Epilepsy or any other type of fit, faint, convulsion or black-out?		s?	Yes Yes Yes	No No No	
How are you today?					
Are you taking any medication now? Do you presently have a cough, cold or runny nose? Have you been unwell in the last month?			Yes Yes Yes	No No No	
When did you last box? Were you injured at that time? After your last bout, were you medically suspended for any reason? Do you understand the sport-specific medical risks of boxing? Do you wish to box today?			Yes Yes No No	No No Yes Yes	
WOMEN ONLY – can you confirm	ı you are not pregr	gnant? No Yes		Yes	
Boxer's Signature:			Dated:		
DOCTOR'S EXAMINATION NOTES	5	General:			
Hands:					
ENT (incl gum shield fit etc):		Eyes:			
CONFIRMED FIT TO BOX : YES / I	NO	Date/Time of Medical			
Doctor's Signature:		Name:			
Country:		IBA certified da	te:		

Keep this form ringside for making contemporaneous notes of pre-, intra- and post-bout medical aspects, to be transposed as and when appropriate.

Space for making contemporaneous ringside notes during the bout and of the post-bout examination findings can be found below:





Signed: Date	ed:	Name:
Post Bout Medical Notes: Signed: Date		Name:





DECLARATION OF NON-PREGNANCY

Declaration of Non-Pregnancy for Women Boxers aged 18 (eighteen) and Older

Date:
Place:
Name of Competition:
I,, declare that I am not pregnant .
I understand the seriousness of this statement and accept full responsibility for it. In the case that this declaration is subsequently shown to be inaccurate or untrue and I suffer any related injury or damage during
the competition, I, on behalf of myself, my heirs, executors and administrators, waive and release any and all
claims for damages I may have against IBA (including its officials and employees), the organisers of the
competition (including the Organising Committee and/or the Host Federation) and the Competition Venue
owners for such injury or damage.
Signature of the Boxer:





IBA Event Management Protocol During COVID-19 Pandemic

Declaration of the absence of COVID-19-specific symptoms

Na	me:
Na	tionality:
Da	te and time of arrival (DD/MM/YY, HH:MM):
Te	am Covid-19 Manager's name:
Со	nsenting parent* for minors:
На	ve you noticed any of the following symptoms within the last 14 days (YES or No)?
Sy	mptoms (YES/NO):
1.	Body temperature over 37°C:
2.	Dry cough:
3.	Sore throat:
4.	Sudden onset of shortness of breath:
5.	Sudden onset of vomiting and/or diarrhoea:
6.	Sudden onset of articular and/or muscle pain:
7.	Fatigue without a known cause:
Are	e the following statements TRUE for you (YES or NO)?
	In the past 1 month, have you or anyone in your household met a presumptive or declared OVID-19 infected person or anyone who got into close contact with such person?
9.	Is anyone in your household under self or officially imposed quarantine?
0	ereby declare on my honour that if any of the above symptoms occur at any point during my star travel, I will duly and immediately inform my Team's Covid-19 Manager, who shall then inform BA and the Local Organising Committee's Covid-19 Managers.
Sig	nature:
Pri	nt name:
Da	te (DD/MM/YYYY):
Те	am Covid-19 Manager: Athlete / Parent*

*Consenting parent: parent, caretaker, authorized person to sign a consent on behalf of the minor.





IBA Event Management Protocol During COVID-19 Pandemic

COVID-19 Liability release waiver (Over 18 yrs)

The World Health Organization has declared the novel Coronavirus (COVID-19) a worldwide pandemic. Due to its capacity to transmit from person to person through respiratory droplets, the IBA has set recommendations, guidelines, and some prohibitions throughout the IBA Events.

The IBA Event Management Protocol during COVID-19 Pandemic applies to all the IBA events' participants.

In consideration of my participation in the IBA events, I, the undersigned,

- 1. Confirm that I have taken good note of the IBA Event Management Protocol during COVID-19 and hereby undertake to comply with it.
- Acknowledge and agree to the following:
- I am aware of the existence of the risk to my physical appearance at the venue and my participation in the IBA events that may cause injury or illness, such as COVID-19.
- I have not experienced symptoms of fever, fatigue, difficulty in breathing, dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days.
- I have not been, nor any of my relatives, diagnosed to be infected with the COVID-19 virus within the last 30 days.
 - 3. And, following the pronouncements above, I hereby declare the following:
 - I am fully and personally responsible for my own safety and actions while and during my participation in the IBA events, and I recognize that I may be, in any case, be at risk of contracting COVID-19.
 - With full knowledge of the risks involved, I hereby release, waive, and discharge IBA from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained by me related to COVID-19 while participating in any IBA events while in, on, or around the premises or while using the facilities that may lead to unintentional exposure or harm due to COVID-19.

By signing below, I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; That I have been sufficiently informed of the risks involved, and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

Name:	
Signature:	
Date:	





ANTI-DOPING CONSENT FORM

As a member of the International Boxing Association (IBA) and/or a participant in an event authorized or recognized by IBA, I hereby declare as follows:

- 1. I acknowledge that I am bound by, and confirm that I shall comply with, all of the provisions of the IBA Statutes, IBA Competition Rules, IBA Disciplinary Code, IBA Anti-Doping Rules (as amended from time to time), the World Anti-Doping Code (the "Code") and the International Standards issued by the World Anti-Doping Agency, as amended from time to time, and published on the respective websites.
- 2. I understand and agree to the possible creation of my profile in ADAMS, which is hosted by WADA on servers based in Canada, and/or any other authorized National Anti-Doping Organization's similar system for the sharing of information, and to the entry of my *Doping Control*, whereabouts, *Therapeutic Use Exemptions*, *Athlete Biological Passport*, and sanction-related data in such systems for the purposes of anti-doping and as described above. I understand that if I am found to have committed an anti-doping rule violation and receive a sanction as a result, that the respective sanctions, my name, sport, *Prohibited Substance* or *Method*, and/or tribunal decision, may be publicly disclosed by IBA and its member National Federations and/or National Anti-Doping Organizations in accordance with the Code. I understand that my information will be retained for the duration as indicated in the ISPPPI.
- 3. I acknowledge the authority of IBA and its member National Federations and/or National Anti-Doping Organizations under the IBA Anti-Doping Rules to enforce, to manage results under, and to impose sanctions in accordance with the IBA Anti-Doping Rules and the IBA Disciplinary Code.
- 4. I acknowledge and agree that any dispute arising out of a decision made pursuant to the IBA Anti-Doping Rules, after exhaustion of the process expressly provided for in the IBA Anti-Doping Rules, may be appealed exclusively as provided in Article 13 of the IBA Antidoping Rules to an appellate body for final and binding arbitration, which in the case of International-Level Athletes is the Court of Arbitration for Sport (CAS).
- 5. I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal.
- 6. I understand that:
- a. My data, such as my name, contact information, birthdate, gender, sport nationality, voluntary medical information, and information derived from my testing sample will be collected and used by IBA, its Delegated Third Parties and member National Federations and/or National Anti-Doping Organizations and WADA for anti-doping purposes;
- b. WADA-accredited laboratories will use the anti-doping administration and management system ("ADAMS") to process my laboratory test results for the sole purpose of anti-doping, but shall only have access to de-identified, key-coded data that will not disclose my identity;
- c. I may have certain rights in relation to my *Doping Control*-related data under applicable laws and under WADA's International Standard for the Protection of Privacy and Personal Information (ISPPPI), including rights to access, rectification, restriction, opposition and deletion, and remedies with respect to any unlawful processing of my data, and I may also have a right to lodge a complaint with a national regulator responsible for data protection in my country;
- d. If I object to the processing of my *Doping Control*-related data or withdraw my consent, it still may be necessary for IBA, its Delegated Third Parties and member National Federations and/or National Anti-Doping Organizations and/or WADA to continue to process (including retain) certain parts of my *Doping Control*-related data to fulfill obligations and responsibilities arising under the Code, International Standards or national anti-doping laws notwithstanding my request; including for





the purpose of investigations or proceedings related to a possible anti-doping rule violations; or to establish, exercise or defend against legal claims involving me, WADA and/or an Anti-Doping Organization.

- e. Preventing the processing, including disclosure, of my *Doping Control*-related data may prevent me, WADA or Anti-Doping Organizations from complying with the Code and relevant WADA International Standards, which could have consequences for me, such as an anti-doping rule violation, under the Code;
- f. To the extent that I have any concerns about the processing of my *Doping Control*-related data I may consult with IBA and/or WADA (privacy@wada-ama.org), as appropriate.
- 7. I understand and agree that my information may be shared with authorized service providers and competent Anti-Doping Organizations and public authorities as required for anti-doping purposes. I understand and agree that persons or parties receiving my information may be located outside the country where I reside, including in Switzerland and Canada, and that in some other countries data protection and privacy laws may not be equivalent to those in my own country. I understand that these entities may rely on and be subject to national anti-doping laws that override my consent or other applicable laws that may require information to be disclosed to local courts, law enforcement, or other public authorities. I can obtain more information on national anti-doping laws from my National Anti-Doping Agency.

I have read and understand this declaration.	
Date (Day/Month/Year)	Print Athlete's Name (Last Name, First Name)
// Athlete's Date of Birth (Day/Month/Year)	Signature





TECHNICAL VIDEO RECORDING AGREEMENT

1, (, on behalf of the National Federation of			
IBA has granted the right to record the Maribor, Slovenia, 2022, to our nomina technical purposes only.		Belt Series,		
I confirm that all members of the delegation persons recording bouts from other area their accreditation rescinded.	<u> </u>	•		
I understand that the use of these record on social media networks is strictly prol legal action may be taken against individ	hibited and acknowledge that disciplina	ary and/or		
Name				
Signed:				
Title (i.e. Team Manager, Coach, etc.):				
National Federation:				
Date:				