# BAWOMEN'S WORLD BOXING CHAMPIONSHIPS





NEW DELHI 2023 MARCH 14 - 26 TEAM DELEGATIONS' HANDBOOK



WOMENS WORLD BOXING CHAMPIONSHIPS

NEW DELHI 2023











President of the International Boxing Association (IBA)

Dear Boxing Family,

One of the biggest sporting events is coming closer – IBA Women's World Boxing Championship, which is going to take place in New Delhi, India in March 2023. This is not the first time that top women boxers from around the globe will arrive to compete in India.

The country has a history of success in organising the Women's World Championships in 2008 and 2018. This year IBA, together with the LOC, is going to multiply this success.

India is the homeland of many legendary boxing stars and is very passionate about our sport, so there is no doubt that the flagship IBA competition will be conducted at the highest level. This will be a perfect opportunity to inspire more and more women to take up the sport and popularise it around the world.

As always, the well-being of athletes is an absolute priority for us, so I am happy to confirm a significant prize money fund for the medallists. I invite all boxing fans to come to India to join this festival of the sport globally, and I wish all the athletes the best of luck in their new victories!

Let's make this event an unforgettable highlight for all of us!

Sincerely yours,

#### **Umar Kremley**

President of the International Boxing Association (IBA)



President of the Boxing Federation of India (BFI)

Dear Boxing Family,

The popularity of boxing has been on a rise throughout the world. And it is no different in India. With another global boxing event around the corner – the IBA World Women's Boxing Championships 2023 – lovers of the sport are up for yet another treat. Boxing Federation of India (BFI), in association with the International Boxing Association (IBA), are geared up to make this event not just the talk of the town, but a global success.

Having hosted two such prestigious boxing events, a third is a matter of great pride for us. Having said that, I, on behalf of the Boxing Federation of India, take the pleasure of welcoming all National Boxing Federations and their esteemed Members, Technical Officials and Players to this prestigious event to be held in New Delhi, India from March 14 to 26, 2023.

What better a place to host the championships than the capital city of India – a city that is as futuristic, as it is historic! While the sights and smells of the city enthral your senses, we promise to host a championship that matches its energy, vitality and grandeur. And what better time than March – a month marked by clean air, beautiful weather and picturesque sights all across the country.

India is world-renowned for its hospitality and besides all IBA safety protocols, we promise to embody the spirit of 'Atithi Devo Bhava' (Guest is God) towards every individual who becomes a part of this prestigious event.

The grandeur of the event will be unmatched, as we take the event to the world by broadcasting it live on television and streaming it online for the convenience of our fraternity, as well as boxing fans from across the world.

With your support and presence, I am confident that India will showcase the highest-ever representation of Elite Women Boxers from across all categories of the sport. And so, I sincerely hope that you will accept this invitation, and allow us to organise one of the finest World Women's Boxing Championships ever.

### **Ajay Singh**

President, Boxing Federation of India

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## ORGANISER

New Delhi, India has been selected as the host city to conduct the IBA Women's World Boxing Championships, 2023.





## **CONTACTS**

Subject	E-mail
Registrations for Team Delegations	database@iba.sport
Registrations for Extra Officials	database@iba.sport
Visa & Entry Requirements	Loc2023@boxingfederation.in
Competition-related	sport@iba.sport
Press & Media-related	communication@iba.sport
Accommodation	accommodation@boxingfederation.in
Transport	transport2023@boxingfederation.in

## COVID-19 PROTOCOL

The event is approved as a sporting event, and IBA Event Management Protocol during the COVID-19 pandemic will be implemented accordingly. The current Covid-19 situation is very dynamic, therefore, an update regarding all requirements and protocols will be provided if the situation changes.

At the moment, individuals will need to have their vaccination certificate to enter India. Non-vaccinated persons are requested to get a negative RT-PCR test conducted within 48 hours before arrival.

For the latest guidelines, please check <a href="https://www.mohfw.gov.in">https://www.mohfw.gov.in</a>.



## COMPETITION

#### **Format**

- The new IBA Bout Review Rule will be applied
- Rule 20 in the IBA Technical and Competition Rules will be followed
- Seeding will be applied based on IBA rankings
- Professional hand wraps will be used as per IBA Technical and Competition rules
- The Official Draw will be conducted by Sports
   Data through an electronic draw
- Two rings will be used until the Quarterfinals phase
- Medals will be distributed to the first 4 boxers of each weight category (1 Gold, 1 Silver, 2 Bronze)
- The Technical Delegate of the event is Mr Wayne Rose
- The Event will be officiated by IBA International Technical Officials and IBA 3 Star-certified Referees and Judges, all appointed by IBA

#### **IBA Elite Women Boxers**

The Championships will be organised based on IBA Technical and Competition Rules. The twelve (12) IBA Elite Women's weight categories will be contested:

#	Weight Category	over Kg.	to Kg.
1	Minimum weight	45	48
2	Light Flyweight	48	50
3	Flyweight	50	52
4	Bantamweight	52	54
5	Featherweight	54	57
6	Lightweight	57	60
7	Light Welterweight	60	63
8	Welterweight	63	66
9	Light Middleweight	66	70
10	Middleweight	70	75
11	Light Heavyweight	75	81
12	Heavyweight	81	-



## **Prize money**

The IBA Women's World Championships will have prize money of USD 2.4 Million split across 12 weight classes and gold, silver and bronze medallists.

An athlete must win at least one bout to be eligible to earn the designated prize money. In the case that there is only one athlete present in a particular category, she will not be entitled to the prize money.

#### To avoid doubt:

- If the athlete has a win by Walkover (WO) and is a medallist, she will be entitled to receive the prize money.
- If the athlete has a loss and no wins and is a medallist, she is not entitled to receive the prize money.

Medal	Prize Money
Gold	USD 100,000
Silver	USD 50,000
Bronze	USD 25,000
Bronze	USD 25,000



## **Sport Entries Check**

The Sport Entries Check will take place on March 14 and 15, 2022. Teams will be informed of the exact date and time of their appointment during accreditation after arrival. Please make sure to arrive in New Delhi, India, on or before March 13, 2022.

Each Team delegation can appoint a maximum of 2 persons to attend the Sport Entries Check. IBA recommends 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, the national flag and anthem, and to present the official documents listed below to IBA.



All forms are attached to the Team Delegation Handbook

Please note that the presence of your representative is mandatory. In the event that Team Delegation Representatives do not show up for the scheduled appointment, the entire Team will be disqualified.

ALL MEDICAL DOCUMENTS MUST BE PRESENTED.

## Your representative(s) must present:

- 1. Entry list of the delegation
- 2. Passport of each boxer
- 3. Record Book of each boxer
- 4. Boxers' uniform examples
- 5. Results of Hepatitis B, Hepatitis C and HIV tests, not older than 6 months
- 6. IBA Medical Certificates issued within the last 30 days for each boxer
- 7. Declaration of Non-pregnancy
- 8. IBA Fit to Box form
- 9. COVID-19 Declaration of No-symptoms Form signed by all team members
- 10. COVID-19 Liability Waiver Form signed by all team members
- 11. Anti-Doping consent forms signed by each boxer
- 12. Video consent form signed by Team Manager/ Head Coach
- 13. IBA General Participation Form
- 14. IBA Code of Conduct

## **EVENT SCHEDULE**

Event	Time	Place
March 13		
Arrivals	All Day	Radisson Blu Hotel Radisson Blu Tower
March 14 to March 26		
Accreditation Centre	09:00 - 20:00 (Mar 14 - 15) 13:00 - 20:00 (Mar 16 onwards)	Radisson Blu Team Hotel K.D. Jadhav Indoor Hall, New Delhi
March 14		
Sport Entries Check – Day 1	09:00 - 12:00 13:00 - 18:00	Team Hotel - Radisson Blu
March 15		
Sport Entries Check – Day 2 Technical Meeting Official Draw Opening Ceremony Welcome Dinner (officials, team reps – no athletes)	08:00 - 11:00 13:30 - 14:30 14:30 - 16:00 18:30 - 19:30 20:00 - 22:30	Radisson Blu Hotel Radisson Blu Hotel Radisson Blu Hotel K.D. Jadhav Indoor Hall, New Delhi Radisson Blu
March 16 to March 26 (Except Rest	Day: March 24)	
Daily Weigh-in	07:00 - 08:00	Team Hotel – Radisson Blu
March 16 to March 23		
Preliminaries/Semi-Finals	14:00 First Session (Afternoon) 18:00 Second Session (Evening)	K.D. Jadhav Indoor Hall, New Delhi
March 24 - Convert to one ring afte	r Semi-Finals	
Rest Day Photoshoot for Semi-Finalists	TBD	TBD
March 25		
Ceremonial weigh-ins Finals and Medal Ceremonies	11:00 - 12:00 18:00	Team Hotel K.D. Jadhav Indoor Hall, New Delhi
March 26		
Ceremonial weigh-ins Finals and Medal Ceremonies	11:00 - 12:00 18:00	Team Hotel K.D. Jadhav Indoor Hall, New Delhi
March 27		
Departures		



## REGISTRATIONS

## **Participating Boxers**

AGE ELIGIBILITY: Boxers born from January 01, 1983 to December 31, 2004

Each National Federation 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)

#### **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 should be according to the table below:
  - > 1-3 Boxers: Up to 3 Coaches
  - > 4-8 Boxers: Up to 6 Coaches
  - > 9 12 Boxers: Up to 8 Coaches

#### **Coaches**

Each National Federation 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)

- Only IBA-certified Coaches (1-star to 3-star) are allowed to work in the Field of Play (FOP)
- One of the 3 coaches can be replaced by an IBAcertified Team Cutman.

If your team does not have an IBA-certified coach (1, 2 or 3-star), please raise this at the Technical Meeting, so arrangements can be made with another team.



## **Extra Team Officials & National Federation Representatives**

#### **Extra Team Officials**

Any individual that the National Federation (NF) would like to send to work along with the team in addition to the ones outlined in point 4.b., will be registered as an Extra Team Official.

Extra Team Officials who do not have a direct link with the preparation of the team for the competition will not receive accreditation.

- Extra Team Officials
  - National Coach of a registered boxer
  - Additional Physiotherapist
  - Additional Doctor
  - Nutritionist

- NF Representatives: Any individual attending the event as a representative of the NF, such as:
  - NF President
  - NF Secretary General
  - NF Executive Board Member
  - NF President Accompanying Guest
  - NF Administrative Staff

Each National Federation can register up to a total of 6 additional persons within the 2 categories named above.

All Extra Team Officials and National Federation Representatives' registrations must be done through the IBA database in the dedicated section of the event.

In the event that one of the representatives has special security needs (personal security), please make sure that you contact the LOC at loc2023@boxingfederation.in to arrange access, accreditation and entry into India in accordance with local authorities.



If you plan to bring more than 6 additional persons, please note that accreditations will not be provided.



## **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	Each National Federation through web registration on the database	January 17 – February 25, 2023 (23:59 CET)
Team officials	Each National Federation through web registration on the database	January 17 - February 25, 2023 (23:59 CET)
Extra team officials	Each National Federation through web registration on the database ("Extraofficials section)	January 17 – February 25, 2023 (23:59 CET)
Arrival/Departure time of the delegation	Each National Federation through web registration on the database ("Travel details" section)	January 17 – February 25, 2023 (23:59 CET)
Rooming list	Each national federation through web registration on the database ("room request" section)	January 17 – February 25, 2023 (23:59 CET)
Payment deadline for accommodation	Every registered national federation to transfer the money for accommodation to the LOC. Bank details are provided in the Accommodation section.	February 25, 2023



## VISA & ENTRY REQUIREMENTS

The Organiser will provide assistance regarding Visas if required. All foreign nationals entering India are required to possess a valid international travel document in the form of a national passport with a valid Visa. All individual visa seekers will find the necessary information by clicking on the link below.

Link: https://indianvisaonline.gov.in/visa/index.html

It is recommended that the team delegation applies for the visa well in advance to ensure the visa is obtained on time. For any clarification on the processing time, please contact the LOC.

#### **Contacts**

For all information, please contact: loc2023@boxingfederation.in or Ms Kajiloni Krichena Tel: +91 7085333972

#### **Process**

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

- Team delegations who need a visa must immediately request it at the Indian Embassy/ Consulate of their country or through an e-visa.
- To find the list of countries eligible for the e-visa and to apply for the visa by either means.

Please follow the below link.

https://indianvisaonline.gov.in/evisa/tvoa.html



The deadline to request assistance is February 25, 2023. Subsequently, you will receive an invitation letter which is necessary to request the visa.



## TRANSPORTATION

## **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 loc2023@boxingfederation.in

The airport of arrival and departure will be Indira Gandhi International Airport, Terminal 3, New Delhi



Deadline to submit arrival and departure information: February 25, 2023.

## **Local Transportation**

Local transportation will be provided by the organisers:

- To and from I.G.I. Airport Terminal 3, New Delhi
- To and from the hotel to/from the competition and training venue
- To and from the hotel to/from the Technical Meeting and Official Draw
- To and from the hotel for Opening Ceremony

## **ACCOMMODATION**

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.

## **Team Delegations' Hotels**

Members of Team Delegations and Team Delegations' Staff who have "Extra Team Officials" accreditation, such as national coaches, additional doctors/ physiotherapists, and nutritionists can stay at the Team Delegations' hotels.



NF Representatives cannot stay at Team Delegations' Hotels.



HOTEL #1

# RADISSON BLU KAUSHAMBI

Address:

## H-3, Modipon Vihar, Sector 14, Kaushambi, Ghaziabad

Distance to venue:

## 13 km (16 minutes)

Types	Prices (Full board) / per person
Single Room	120 USD
Double Room	95 USD
Triple Room	75 USD



**HOTEL #2** 

# RADISSON BLU TOWERS

Address:

## CK II Sec-14 Distt., Kaushambi, Ghaziabad, Uttar Pradesh 201010

Distance to venue:

## 13 km (16 minutes)

Types	Prices (Full board) / per person
Single Room	120 USD
Double Room	95 USD
Triple Room	75 USD



Extra Team Officials and Media Hotel

## THE LALIT

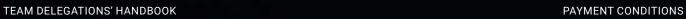
Address:

Fire Brigade Lane, Barakhamba, New Delhi, Delhi 110001

Distance to venue:

3.6 km (11 minutes)

Extra Officials – NF Representatives and Media are not allowed to stay in any hotel dedicated to Team Delegations. IBA, in consultation with the LOC reserves the right to change the hotels based on the availability and final registration numbers. The NFs will be informed of any such changes.





## **PAYMENT CONDITIONS**

All Team Delegations must pay their full room charges as above for the entire Championships Period by 25h February 2023. Please transfer the funds to the account details shown here:

A/C Holder's Name: Boxing

**Federation of India** 

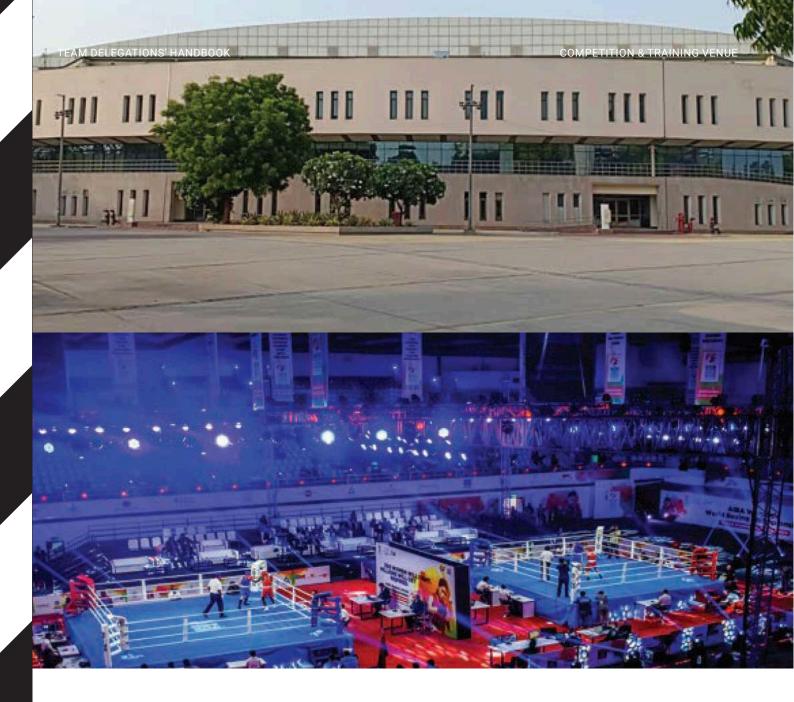
A/C No: 3636622735

Swift Code: CBININBBPAR

Bank Name: Central Bank of India

Bank Address: Parliament Street,

New Delhi- 110001



**Competition Venue** 

# COMPETITION & TRAINING VENUE

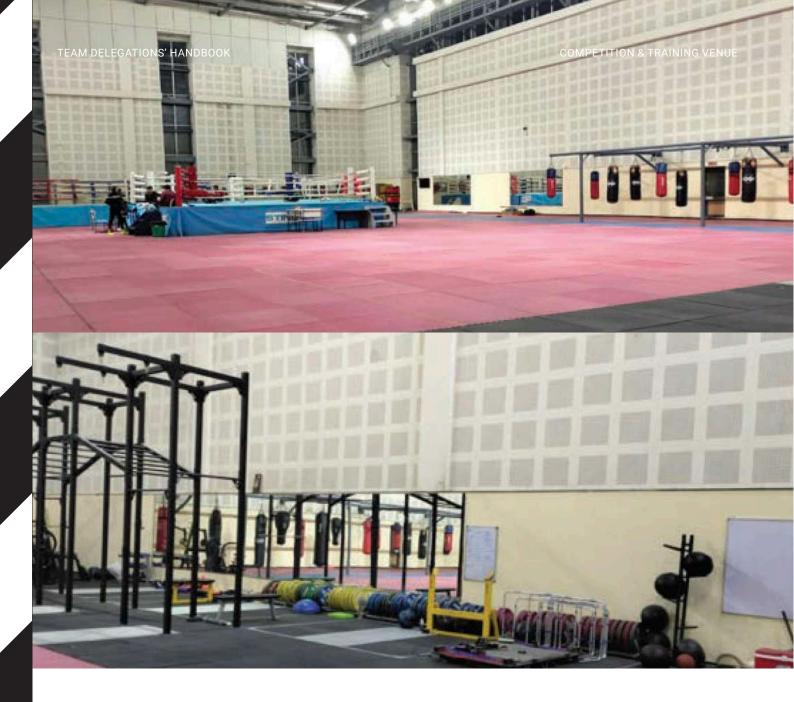
## K.D. JADHAV INDOOR HALL, I.G. Sports complex, New Delhi

Address:

ITO, I.P. State New Delhi 110002

Seating Capacity:

6000



**Training Venue** 

COMPETITION & TRAINING VENUE

BOXING TRAINING HALL, I.G. SPORTS COMPLEX, NEW DELHI



## **ACCREDITATIONS**

## 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 the passport. The Accreditation Center will be located at the Radisson Blu hotel.

## For Extra Team Officials and National Federation 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 February 25, 2023.

### For Media and Press

#### International media

For accreditation, please contact: communication@iba.sport

**Local Media** (radio, TV and website with audio/video coverage): For accreditation, please contact: loc2023@boxingfederation.in

## 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 only and not for public broadcasting, social media included. 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.

## **IMAGE RIGHTS**

IBA has appointed an IBA photographer to promote the image of boxers during the World Championships. By participating in the Championships, each boxer agrees to release their image rights to IBA for promotional purposes.

## 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. TUE must be submitted through the ADAMS system no later than February 13, 2023 (23:59 GMT).

## **MEDICAL CARE**

The LOC will provide medical care and first-aid during the entire Championship period to any participant who suffers from a sports injury sustained during the Championship.

## **INSURANCE**

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.

## **AWARDS**

Several awards, including the Best Boxer Trophy of the IBA Women's World Boxing Championship, New Delhi, 2023 will be distributed after the last finals ceremony.







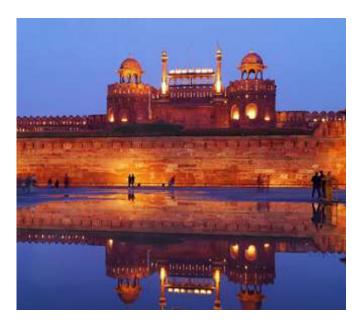
## HOST CITY -New Delhi, India

Delhi is the capital city of India, located in Northern India. Delhi's culture has been influenced by its lengthy history and historic association as the capital of India through a strong Punjabi influence is evident in its current language, dress and cuisine. The city has many historical monuments and tourist attractions as well as lively marketplaces and great food.

## **AKSHARDHAM TEMPLE**

Delhi is the capital city of India, located in Northern India. Delhi's culture has been influenced by its lengthy history and historic association as the capital of India through a strong Punjabi Influence can is evident in its current language, dress and cuisine. The city has many historical monuments and tourist attractions as well as lively marketplaces and great food.





## **RED FORT OR LAL QUILA**

At the centre of the Mughal Sultanate, the Red Fort or Lal Quila stands unique with its thick red sandstone walls. Emperor Shah Jahan is behind this grand historical monument of India.

## JAMA MASJID

Jama Masjid near Red Fort is one of the largest mosques in India. Popular as Shah Jahan's last architectural extravagance, the mosque took its final shape in the year 1656. Interestingly, its inner courtyard can hold an incredible 25,000 individuals at a time.



## LOTUS TEMPLE

The Lotus Temple is a Bahá'í House of Worship that was dedicated in December 1986. Notable for its flowerlike shape, it has become a prominent attraction in the city. Like all other Bahá'í Houses of Worship, the Lotus Temple is open to all, regardless of religion or any other qualification.





## DELH

The historical capital city, Delhi is a foodies' paradise. From street food to international cuisines, it is also one of the only places in India to offer a wide variety of street food options. Anyone who has been to the city can tell you that it's a healthy and muddled mix of cultures that's led to a warm bonhomie amongst its residents and visitors. From the old-world lanes of Chandni.

Chowk to the more imperial set-up in Connaught Place, Delhi. As for shopping, Delhi boasts a wide variety of traditional as well as modern markets, offering a wide range of choices for locals and tourists alike.



#### 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 de	claration.
// Date	Print Athlete's Name (Last Name, First Name)
(Day/Month/Year)	Time Atmete 3 Name (Last Name, First Name)
/	
Athlete's Date of Birth (Day/Month/Year)	Signature



## **IBA MEDICAL CERTIFICATE**

	Athlete	
NAME:		
DATE OF BIRTH:		
SIGNATURE:	DATE:	
	Doctor	
NAME:		
TITLE/POSITION:		
ADDRESS:		
SIGNATURE:		DATE:
STAMP		
COMMENTS:		
	Fit to Box	
	<b>Not</b> Fit to Box	ă



## QUESTION FOR ATHLETE: IF YES, EXPLAIN 1. Is a Doctor currently treating you for anything? Have you ever been unconscious or had a concussion? 2. 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. 6. Do you have a history of hepatitis B or hepatitis C, or HIV infection? 7. Does any disease run in your family? Sudden unexpected deaths? Have you had any surgery? 8. 9. Have you ever had to stay in a hospital? 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	
Cardio Vascular System	Pulse/blood pressure (record)	Normal	Abnormal	
	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	
	Type of reaction (record)			
Medications used	Name and dosage (record)	Yes	No	
Any TUE Submitted ? No Yes (If YES, pleas			ES, please explain):	
Doctor's Stamp:				



## **IBA Event Management Protocol During COVID-19 Pandemic**

## Declaration of the absence of COVID-19-specific symptoms

Nam	le:	
Natio	onality:	
Date	e and time of arrival (DD/MM/YY, HH:MM):	
Tear	m Covid-19 Manager's name:	
Con	senting parent* for minors:	
Have	e you noticed any of the following symptoms within the last 14 days (	YES or No)?
Sym	nptoms (YES/NO):	
1. I	Body temperature over 37°C:	
2. I	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. I	Fatigue without a known cause:	
Are	the following statements <u>TRUE</u> for you (YES or NO)?	
	In the past 1 month, have you or anyone in your household met a pro OVID-19 infected person or anyone who got into close contact with s	•
9. I	s anyone in your household under self or officially imposed quarant	ine?
or t	eby declare on my honour that if any of the above symptoms occur at a travel, I will duly and immediately inform my Team's Covid-19 Manager A and the Local Organising Committee's Covid-19 Managers.	
Sign	ature:	
Print	t name:	
Date	e (DD/MM/YYYY):	
Tear	m 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:	



#### **TECHNICAL VIDEO RECORDING AGREEMENT**

I, on behalf of the National Federati	ion of
, acknowledged IBA has granted the right to record the bouts of the IBA Women's World B Championship 2023 in New Delhi, India, to our nominated delegation members for dedicated area for technical purposes only.	oxing
I confirm that all members of the delegation will be advised and acknowledge that an persons recording bouts from other areas of the stadium may be removed and may have their accreditation rescinded.	•
I understand that the use of these recordings for commercial use and / or for broadcast on social media networks is strictly prohibited, and I acknowledge that disciplinary and legal action may be taken against individuals and/or National Federations who do so.	_
Name	
Signed:	
Title (i.e. Team Manager, Coach, etc.):	
National Federation:	
Date:	



## **DECLARATION OF NON-PREGNANCY**

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

ate:
lace:
ame of Competition:
, declare that <b>I am not pregnant</b> .
understand the seriousness of this statement and accept full responsibility for it. In the case that this
eclaration is subsequently shown to be inaccurate or untrue and I suffer any related injury or damage during
ne competition, I, on behalf of myself, my heirs, executors and administrators, waive and release any and al
aims for damages I may have against IBA (including its officials and employees), the organisers of the
ompetition (including the Organising Committee and/or the Host Federation) and the Competition Venue
wners for such injury or damage.
ignature of the Boxer:

#### **REGISTRATION FORM**

## TO THE IBA WOMEN'S WORLD BOXING CHAMPIONSHIPS 2023, NEW DELHI, INDIA

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

#### I. REGISTRATION

I, the undersigned, knowingly and without duress, do voluntarily submit my Entry to the IBA Women's World Boxing Championships 2023, (hereafter the "Championships"). The IBA Women's World Boxing Championship 2023 are hosted by the International Boxing Association (IBA) and organised by the Indian Boxing Federation (IBF), 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 IBF.

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 IBF 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.

<sup>\*</sup> Athlete \* Team Manager \* Coach \* Doctor \* Observer

#### 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**

	condition of my participation in the Championships, I have taken due note, and I agree to sign the fo bited on this application form:	llowing mandatory forms
(A)	Antidoping consent form (Boxers)	
(B)	Medical certificate (Boxers)	
(C)	Declaration of Non-Pregnancy	
(D)	COVID-19 forms (two) (All participants)	
(E)	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 addition	onal form:
(F)	Technical video recording agreement (One per team)	
I hav	ve read and fully understand this form and its exhibits, including the arbitration clause and waivers listed	d above.
(Sigr	nature of Parent or Legal Guardian is required if the participant is under 18)	
Nam	ne of Participant	Date
Sign	ature of Participant	



#### **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 Hospital? Have you had medical treatment for anything in the last 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?  When did you last box?				Yes Yes Yes	No No No
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 you are not pregnant?				No	Yes
Boxer's Signature:			Dated:		
DOCTOR'S EXAMINATION NOTES Hands:	3	General:			
ENT (incl gum shield fit etc):	um shield fit etc): Eyes:				
CONFIRMED FIT TO BOX : YES / NO D		Date/Time of M	ledical		
Doctor's Signature:		Name:			
Country: IBA c		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:



In-Bout Notes:		
Cianada	Datadi	Nome
Signed:	Dated:	Name:
Post Bout Medical Notes:		
Signed:	Dated:	Name:



#### Code of Conduct

In keeping with our continuous improvement and governance protocols, IBA hereby requests your fullest agreement in your capacity as a Boxing Competition Official, Team Official, Boxing Athlete or Delegate, to the following Code of Conduct, which will apply for the duration of this championship event, directly under the governing authority of IBA.

#### Integrity

- **1.0** I shall ensure that my conduct may not in any manner tarnish the reputation of the sport of boxing or IBA.
- **1.1** I shall in all instances, respect all event regulations set by both IBA and the LOC for this championship event.
- 1.2 I shall not collude or collaborate with any party by violating any technical or hereby other rules of the sport or the IBA Code of Ethics or Disciplinary Code.
- **1.3** I shall always conduct myself in a professional manner, respecting the organisation, the appointed Technical Delegate, all officials, and competitors to the event. This includes those supporting the LOC.
- 1.4 I shall not in any circumstances, directly or indirectly, solicit, accept, or offer any form of remuneration or commission, nor any concealed benefit, service or gift of any nature that could be considered as a bribe or undue influence.
- 1.5 I shall not bet on any part of the boxing competition, bouts, or anything that would conclude a decision of a contest; nor shall I share inside information at any time and in any circumstance.

#### Reporting Obligations

2.0 I must immediately upon receipt, report any approaches or offers, such as those described under paragraphs 1.4/1.5, directly to the Technical Delegate or to the IBA appointed staff. Direct communication can also be made to the following email address <a href="mailto:integrity@IBA.sport">integrity@IBA.sport</a> or by using the dedicated form on IBA official website.

#### Harassment

- **3.0** I shall not enter into any form of harassment or abuse, be it physical, professional, or sexual, and cause or instigate any physical or mental injuries outside of the competition. In this respect, I am aware of the IBA Anti-harassment Policy.
- **3.1** I shall not discriminate against anyone based on race, colour, religion, gender, age, national origin, disability, or sexual orientation.



#### **Responsibilities of Boxing Competition Officials**

- **4.0** Any information deemed confidential I may receive from IBA or may learn in the course of my duties as a Boxing Competition Official, must remain totally confidential and must not be disclosed.
- **4.1** I shall not socialise with or become intimate or enter into any relationship with officials, boxers and/or coaches and seconds and/or other team delegation members. I shall not behave in any way which shall cast doubt on my impartiality as a Boxing Competition Official.
- 4.2 In the event that I have any type of relationship with officials, boxers and/or coaches and seconds and/or other team delegation members, I must immediately disclose this relationship(s) to IBA in writing at <a href="mailto:integrity@IBA.sport">integrity@IBA.sport</a>. I accept in advance that due to this relationship(s); I may not be allowed to further participate within the competition.
- **4.3** I shall fulfil my duties at the highest level. I shall never take biased decisions impacting the course of the outcome of the competition.
- 4.4 I shall not communicate with anyone about any event-related issue within the competition venue and/or any other location of the full duration of the Championships and post event, especially to persons from my own country such as National Federation members, Board members, the media, the public. I shall not comment about any competition-related issue on social media during or post event, nor shall I display any photographs during the Championships that may cause any kind of conflict or undue comment.
- **4.5** I shall be on time for all appointed competition duties assigned to me.
- **4.6** I shall be available to attend any Boxing Competition officials' meetings on or before the respective competition days.
- **4.7** I shall fulfil all duties assigned to me by the Technical Delegate with absolute due diligence.
- 4.8 I shall not use nor carry any electronic communication device, including but not limited to a mobile phone, a laptop, and a tablet computer, inside the competition venue. Exceptionally, the R&J Evaluators and Observers may use laptops to perform their official duties. Ringside Doctors are the exception based on their role requirements.
- **4.9** I shall always maintain a professional appearance when performing my duties as a Boxing Competition Official.
- **5.0** I shall not criticise or attempt to explain calls or decisions made by any Boxing Competition Official, including myself, unless requested to do so by the Technical Delegate.
- **5.1** I shall not be under the influence of alcohol or drugs, which will alter my judgement, while officiating or participating in any IBA competitions, including all related meetings, seminars, refresher training and weigh-in duties.
- 5.2 I shall not smoke in the competition venue, or any area not designated as such for smoking.

## **IBA** Code of Conduct



#### **Interpretation and Sanctions**

- 6.0 I agree to be bound by this Code of Conduct and the IBA Code of Ethics, the IBA Disciplinary Code and the IBA Anti-Harassment Policy; I acknowledge that any infringement of this code may be referred to the IBA Ethics Committee and/or IBA Disciplinary Committee and may lead to disciplinary measures and sanctions taken against me.
- **6.1** I also understand that at any point during an alleged breach of the Code of Conduct and/or breach of the IBA Code of Ethics / IBA Disciplinary Code during the competition, that my accreditation may be suspended or removed without prejudice whilst an investigation is initiated or ongoing.

Name:	Signature:		
Role (circle one*): Athlete*/Team Official*/Competition Official			
NOC code:	Date:		
(Athletes and Team Officials only)	(dd/mm/yyyy)		