

Club/Gym Name:



San Antonio Golden Gloves TEAM ROSTER



DO NOT FILL IN SHADED AREAS FOR OFFICIAL USE ONLY

ANN ANTONIO

	Head Coach:		Phone#				Email					
	Assistant Coach:						Email					
	2nd Assist Coach:			Phone#			Email					
		to each coach listed above ONL	coach listed above ONLY after registrations & certification verification.				Y / N Non-Profit#			Y/N CURRENT		
	Boxers Last Name	Boxers First Name	Age <mark>As of 16 Feb</mark>	Date of Birth mm / dd / yyyy	Previous Bouts	Sex	USA Citz	Open / Novice	Boxers Weight Class	Coach Initials	Officials/Doctors Comments	
1												
2												
3												
4												
5												
6												
7												
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10												
11												
12												
13												
14												
15												