## OFFICE OF THE PRESIDENT

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PROMOTER ()



PHYSICIAN ()

## **APPLICATION FOR ASSOCIATE MEMBERSHIP**

Membership dues are \$150 for one year

<u>Dues apply only for the respective calendar year</u>

Make payable to the LBF and return the application to:

Eva Rolle Mail: eva@legendsbf.com

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Member registering as official please submit a letter of recommendation from your commission. Just because I am a Referee or a Judge registered with the LBF, it doesn't mean that I will automatically get an assignment.

MATCHMAKER

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MANAGER	()	<b>TIMEKEEPER</b>	()	WRIGHTER ()	
REFEREE	()	ANNOUNCER	()	JUDGE ()	
BOXER	Ö	TRAINER	$\ddot{()}$	SECOND ()	
	TATOR/OR ME	DIA	$\ddot{()}$	SUPPORTER ()	
		***PLEAS	SE PRINT CLEA	RLY***	
NAME		DATE			
ADRESS					
CITY/STATE		ZIP CODE			
COUNTRY		TELEFONE			
E-MAIL					
It is my understanding that membership will be granted in accordance with the by – Laws of the LBF.					
MEMBERS SIG	NATURE:				

In order to qualify for the fees listed on the LBF Fee Schedule, the official must be a member of the LBF. A promoter shall not be required

to pay the fees listed to a referee or judge who is not a member of the LBF. Promoters please note that the \$250 fee is for Associate Membership only. Promoter registration fees are listed in the enclosed fee schedule.

PLEASE CONTACT WITH ANY QUESTIONS Eva Ruth Rolle E-Mail: eva@legendsbf.com