

2024 Indiana State Golden Gloves

Name _	ame Date of Birth		
Address	Address Phone		
City		State /Zip	
Club		Coach	
Weight		Division	
	Open 18 to 40 Yea	ars of Age 112, 125, 132, 139, 14	47, 156, 165, 176, 203, 203+
Novice		ge Boxers who have won sub-no er 112, 125, 132, 139, 147, 156,	ovice, Jr. open and never boxed as an 165, 176, 203, 203+
Junior (Open 22 to 40 Years	of Age with less than 5 bouts 13 203, 203+	12, 125, 132, 139, 147, 156, 165, 176,
Sub-No	ovice 18 to 24 Years	of Age with less than 5 bouts 11 203, 203+	12, 125, 132, 139, 147, 156, 165, 176,
	Female Open I	Boxers 110, 119, 125, 132, 139,	146, 154, 165, 178, 178+
	removed from the		oplication. If I fail to make the weight, he above information is correct, and I e start of the tournament.
	BOXER	. <u></u>	COACH

Please send all entry forms to Dianna Scardina

E-mail: diannaindianaboxing@use.startmail.com



2024 INDIANA STATE JUNIOR AND YOUTH GOLDEN GLOVES

Name	Date of Birth		
Address	Phone		
City	State /Zip Coach		
Club			
Weigh	t Division		
Junior 15 and 16	/ears of Age 101, 106, 110, 114, 119, 125, 132, 138, 145, 154, 165, 176+		
Youth 17 Years o	f Age 106, 112, 119, 125, 132, 139, 147, 156, 165, 176, 189, 203, 203+		
I will be removed fro	nust make the weight stated on this application. If I fail to make the weight, m the tournament. I confirm that all the above information is correct, and I for my Passbook two weeks before the start of the tournament.		
BOXER	COACH		
	PARENT OR LEGAL GUARDIAN		

Please send all entry forms to Dianna Scardina E-mail: diannaindianaboxing@use.startmail.com