



3701 Danforth Ave, Ontario M1N 2G2
t. 416-426-7250 · f.416-426-7367 ·
e.info@boxingontario.com www.boxingontario.com

Request for Club Transfer

Date _____

I _____ request permission to transfer
(athlete's name)

from _____
(club name)

to _____ for the remainder of 202_ registration year.
(club name)

I agree to pay financial restitution to my former club for fees owing or registrations paid on my behalf.

Signed _____
(Athlete's Name)

I agree to the release of the above mentioned athlete from the _____
(Club name)

Signature club executive or coach _____.

I agree to accept the above mentioned athlete to the _____
(Club name)

Signature club executive or coach _____.

Approved / Not Approved

Date _____

Signature _____.

Executive Director
Boxing Ontario