

Athlete Registration and Consent

Season 2026-27. One form per athlete. A parent or guardian completes and signs it and returns it to the coach or to info@mjboxing.ca. Please print clearly.

1. Athlete

Full name: _____

Preferred name: _____

Date of birth (year-month-day): _____ Age: _____

Gender (optional): _____ School
(optional): _____

Program: ☐ Foundations ☐ Youth Academy ☐ Teen Academy ☐ Girls Academy ☐ Competitive Team ☐
Community Youth Program

Boxing Saskatchewan registration this season: ☐ Competitive (Initiation, Junior, or Youth) ☐ Recreation ☐
Not this season

First time registering with Boxing Saskatchewan: ☐ Yes ☐ No

2. Parent or guardian

Name: _____

Relationship to athlete: _____

Phone: _____ Email: _____

Address: _____

Second parent or guardian (optional): _____ Phone: _____

3. Emergency contacts (two people other than the parent or guardian above)

1. Name: _____ Relationship: _____ Phone: _____

2. Name: _____ Relationship: _____ Phone: _____

4. Health information

Conditions the coaches should know about (asthma, diabetes, epilepsy, heart, bleeding disorders, other): _____

Allergies and how serious (EpiPen?): _____

Medications carried or taken regularly: _____

Concussions or head injuries, with dates: _____

Injuries in the last 12 months: _____

Family doctor (optional): _____ Phone: _____

☐ To my knowledge my child has no condition that makes boxing training unsafe, or I have described it above. I will tell the coach if anything changes, including any concussion, and I understand that after a concussion the athlete returns to training only with a physician's clearance.

5. Consent and acknowledgment

Please read each point. Initial the line beside it.

1. **Participation.** I consent to my child taking part in the Moose Jaw Boxing programs run by MJ Boxing Inc., including training, club events, and travel to events the club organizes. _____
2. **What the activity involves.** Boxing training is physical: conditioning, bag and pad work, footwork, and partner drills with protective gear. Sparring is never required. Only athletes who want it and are invited by the coach spar, with headgear, mouthguard, and gloves, under direct supervision. Injuries can happen in any sport. I understand the nature of the activity and accept the ordinary risks of my child taking part. _____
3. **Sparring.** ☐ Talk to me before my child spars for the first time. ☐ My child may spar when the coach invites them, and I will be told. _____
4. **Emergency care.** If I cannot be reached, I authorize the coaches to get emergency medical care for my child and to share the health information above with the people treating them. _____
5. **Code of conduct and Safe Sport.** We have read the club's Code of Conduct and Safe Sport Policy at mjboxing.ca/governance and agree to follow them. I know that a concern can be raised with the club Secretary at board@mjboxing.ca, a route that is independent of the coaching staff, and that under that policy every coach must be screened and trained before working with athletes. _____
6. **Boxing Saskatchewan.** If my child registers with Boxing Saskatchewan, I understand the club passes the registration fee through at cost, that a competitive registration needs a physician's medical form, and that Boxing Saskatchewan's rules apply at sanctioned events. _____
7. **Fees and cost help.** Fees are the published club schedule. Cost never decides whether a kid trains here. ☐ We are applying to KidSport. ☐ We are applying to Jumpstart. ☐ We would like a confidential conversation about the club's cost help. _____
8. **Photos.** Photos and video are covered by the separate Media Release Form. Nothing is published without it. _____
9. **Privacy.** The club uses this information only to run its programs, keep my child safe, and register with Boxing Saskatchewan and Boxing Canada. It is kept confidentially by the club and is never sold or shared beyond that purpose. _____

Parent or guardian name: _____

Signature: _____ Date: _____

Athlete signature (13 and over, optional): _____

Club use. Received _____ Boxing Sask: ☐ Competitive ☐ Recreation, category _____, fee or credit _____. On file: ☐ medical ☐ media release ☐ KidSport ☐ Jumpstart ☐ roster