



South Australia Boxing And Martial Arts Act 2000

APPLICATION FOR RE-REGISTRATION AS A CONTESTANT

I apply to be re-registered as a boxing or martial arts contestant in South Australia.

Applications will not be processed unless ALL required certificates, attachments and fees are included with the application form. Incomplete applications will be returned unprocessed to the applicant.

SECTION 1

DETAILS:

Title Mr Mrs Ms Miss Dr

Surname:

Full given names:

Date of Birth:

Residential Address:

City/Suburb: Post Code:

Telephone Home: Telephone Work:

Mobile: Facsimile

Email:

Postal address:

City/Suburb: Post Code:

(if the same as residential address write "as above")

SECTION 2

ENTITLEMENT TO BE REGISTERED

Q1. Are you currently registered as a boxing or martial arts contestant in South Australia? (If you were previously registered but your registration has lapsed by more than 6 months do not use this form, you must apply for registration as a new contestant.)

If yes, please provide details of registration with this application. Yes No

\_\_\_\_\_

**SOUTH AUSTRALIA BOXING AND MARTIAL ARTS ACT 2000  
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**Q2.** In the last three years have you been suspended or banned by any boxing, martial arts or combat sports licensing authority, in another State or Territory of Australia?

If yes, please provide details.

Yes  No

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**Q3.** Are you re-applying to compete as an amateur or professional contestant?

Professional

Amateur

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**Q4.** Please list the type of boxing /martial arts styles you are re-applying as a contestant in:

*(e.g. Boxing, Muay Thai, MMA etc.)*

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**Q5.** Give details of your last five contests (amateur or professional).

Date	Location	Am/ Pro	Opponent	Win/Loss	Injuries / suspension

***a = amateur, p = professional***

**Q9.** Current trainer's name and address and phone number: -

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**SECTION 3**

**APPLICATION DECLARATION**

I, the applicant described in this form, do solemnly and sincerely declare that:

- I have read the *Boxing and Martial Arts Act 2000* and regulations and understand my legal obligations if the contestant's licence is granted; and
- The contents of this application form and attachments are true and correct and that I understand that providing false or misleading information is an offence under section 18 of the *Boxing and Martial Arts Act 2000*

I also authorise the Minister for Recreation, Sport & Racing to make any inquiries necessary for the purpose of determining this application.

**Permission to Disclose and Publish Personal Information**

I give permission to the Office for Recreation, Sport and Racing to publish my personal registration details, contest records and medical details in the Boxing and Martial Arts database of the Office for Recreation, Sport and Racing and I approve of the Office for Recreation, Sport and Racing disclosing such details to other regulatory bodies in Australia and elsewhere.

Signature: \_\_\_\_\_ Date \_\_\_\_\_  
(of applicant)

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_  
(if under 18 years)

**Office Use Only:**

Interview Conducted: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Fees Receipt Number: \_\_\_\_\_

Medical Certificate Provided: YES/NO

Serology Certificate Provided: YES/NO      MRI Scan provided: YES/NO

Interview Conducted by: \_\_\_\_\_

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**SECTION 4**

**ADDITIONAL INFORMATION REQUIRED**

1. Application Fee - \$106.00 (Valid for 3 years)

Cheques or money orders should be made payable to:

***The Office for Recreation, Sport and Racing***

2. Completed medical examination form.
3. A serology **Certificate** (Blood test) not more than one (1) month old, preceding the date of lodgement of the licence application. To obtain this certificate you need to consult a medical practitioner.
4. Unless exempt, contestants are required to provide evidence of satisfactory MRI scan of their brain prior not more than one (1) month old preceding the date of lodgement of this application and three (3) yearly thereafter.
5. Two (2) recent id passport photographs.

**LODGEMENT OF COMPLETED APPLICATION**

Please return your completed application form and relevant documents to:

***Boxing and Martial Arts Compliance Officer***  
*Office for Recreation, Sport and Racing*  
*PO Box 219*  
*Brooklyn Park SA 5025*

*Or by hand to:*

*27 Valetta Road, Kidman Park SA 5025*

*Ph: 08 8457 1436 Mob: 0421 612 947*  
*email: [tom.hunter@sa.gov.au](mailto:tom.hunter@sa.gov.au)*

**IMPORTANT INFORMATION**

A copy of the *Boxing and Martial Arts Act 2000* and *Boxing and Martial Arts Regulations 2015* can be obtained at [www.legislation.sa.gov.au](http://www.legislation.sa.gov.au)

The application fee is non-refundable in the event that your application is not accepted.

MRI Scans – Some forms of boxing and martial arts may be exempt from this requirement. It is recommended that you clarify with the Boxing and Martial Arts Compliance Officer whether this requirement applies to you.