



HARYANA STATE BOXING ASSOCIATION

Affiliated to

(Indian Boxing Federation & Haryana Olympic Association)

(Registered Under Society Act XXI of 1860)

President

Khel Rattan

Abhay Singh Chautala

Teja Khera Farm House,

Vill. Chautala, Distt. Sirsa.

Ph. : 01668-289222, 289277

E-mail : abhaysinghchautala@yahoo.co.in

General Secretary

Rakesh Thakran

207/13, 111rd Floor, Subhash Nagar, Old Rly. Road,
Kamla Tower, Near Dhobi Ghat, Gurgaon-122001

Ph. : 9811501094, Fax : 0124-2222398

E-mail : haryanaboxing@yahoo.co.in

Web. : www.haryanaboxing.com

The Secretaries
All Affiliated Units of
Haryana State Boxing Association.

Sub : Commission(s)/Committee(s) of Haryana State Boxing Association

Dear Sir,

This is to inform you that for smooth functioning of Commission(s)/Committee(s) of Haryana State Boxing Association

In view of the above, kindly nominate the person(s) from your unit for various Commission(s)/Committee(s) like Ring Official Commission, Medical Commission and Youth Commission etc. of Haryana State Boxing Association. Your reply must reach us before December 25, 2012.

Thanking you,

Yours Sincerely,

(RAKESH THAKRAN)
General Secretary, HSBA

RING OFFICIALS COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 10 years R/J Experience Exam date _____ Vane _____	Passport Size 2 Photo

MEDICAL COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				MBBS / Diploma in Sports Medicine Attach Certificate:- Indian Medical Council State Medical Council	Passport Size 2 Photo

ATHLETES & YOUTH COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum Senior National Midlist	Passport Size 2 Photo

PRESS & PUBLIC RELATIONS COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 1 year Experience	Passport Size 2 Photo

EQUIPMENT COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum IABF R/J / NIS Coach	Passport Size 2 Photo

BUSINESS & MARKETING COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
					Passport Size 2 Photo

LEGAL & ARBITRATION COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Advocate	Passport Size 2 Photo

DISCIPLINARY COMMITTEE

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 10 year Experience in sports	Passport Size 2 Photo

WOMEN'S COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 5 year Experience in Sports	Passport Size 2 Photo

COACHES COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				NIS Qualified	Passport Size 2 Photo

WSB COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 5 year Experience in Sports	Passport Size 2 Photo

SELECTION COMMITTEE

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Dronacharya Awardees / Arjun Awardees	Passport Size 2 Photo

AIBA PROFESSIONAL BOXING COMMISSION

NAME	Address	Mobile No	E-mail	Qualification	Photo
				Minimum 5 year Experience in Sports	Passport Size 2 Photo

HSBA Record and Website Required District/Club/Academy Boxing Association

Correspondent Address _____
 _____ Pin _____

Telephone No. _____ **Fax No.** _____

E-mail:- _____ **Website** _____

NAME	Address	Telephone No	Designation	Photo
		T.No.	President	Passport Size 2 Photo
		Mob.		
		Fax		
	Pin	E-mail		
NAME	Address	Telephone No	Designation	Photo
		T.No.	General Secretary	Passport Size 2 Photo
		Mob.		
		Fax		
	Pin	E-mail		