

# WBA ASIA BOXING ASSOCIATION (WBA ASIA)



## SUPERVISOR'S REPORT

- Submit along with master scorecard -



VS

_____	(Nationality)	_____	(Nationality)		
Weight: _____	lbs / _____	kg	Weight: _____	lbs / _____	kg

Title (Division) \_\_\_\_\_

Title Date \_\_\_\_\_

City, Country \_\_\_\_\_

Broadcaster \_\_\_\_\_

Bandage check time / Start time \_\_\_\_\_ / \_\_\_\_\_

Belt  YES  NO      Gloves  YES  NO

Medical Checkup  YES  NO

Rules Instruction  YES  NO

#Name handwriting for joining Weigh-In and confirming to understand WBA ASIA contest rules.

\_\_\_\_\_  
Champion (Representative)

\_\_\_\_\_  
Challenger (Representative)

\_\_\_\_\_  
Referee

\_\_\_\_\_  
Judge 1

\_\_\_\_\_  
Judge 2

\_\_\_\_\_  
Judge 3

\_\_\_\_\_  
Local Commissioner

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Physician

\_\_\_\_\_  
Date / Place