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## MANAGER APPLICATION FORM

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### PERSONAL INFORMATION

Have you been licensed by ZNBWCB? Yes  No   
If YES, which year(s) ..... License Number.....

Full Name ..... National ID No .....  
Date of Birth ..... Passport No.....  
Address..... Email Address.....

### PROFESSIONAL CAREER INFORMATION

Occupation ..... Employer .....  
Management Qualification .....  
Institution that Issued Qualification.....  
Number of Boxers, Fighters and Wrestlers You Currently Manage .....  
Number of Years in Boxing / Wrestling and MMA Management .....

I understand that the issuance of a registration certificate is at the discretion of the board, and that any registration certificate may be suspended or cancelled at any time. I declare that I have never been convicted of any crime and sentenced to imprisonment without the option of a fine therefore.

Signature of applicant ..... Date...../...../.....