



**Address:** 95 Jason Moyo Cecil House  
Office Number 214 Harare

**Website:** combatsports.co.zw  
**Email Address:** info@combatsports.co.zw  
**Phone Number:** +263242709933

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## TECHNICAL OFFICIALS APPLICATION FORM

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### TICK WHERE APPLICABLE

Announcer  Coach  Judges/Referee  Trainer  Ring Side   
Ringmaster  Matchmaker  Medical Doctor  Second

### PERSONAL INFORMATION

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

### PROFESSIONAL LEVEL

Occupation ..... Employer .....  
Qualification (i.e Coaching Level 1, WBC Judging Level 2).....  
Institution that Issued Qualification.....  
Number of Matches Officiated/ Athletes Coached /Coached .....  
Highest Level of Officiating/Coaching .....  
Have you been licensed by ZNBWCB ? Yes  No   
If YES, which years .....

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...../...../.....