



AFFILIATED TO
INTERNATIONAL
BOXING
ASSOCIATION (AIBA)

IRISH ATHLETIC BOXING ASSOCIATION

NATIONAL BOXING STADIUM • SOUTH CIRCULAR RD • DUBLIN 8 • D08 HY40
T: +353 (0)1 453 3371 F: +353 (0)1 454 0777 E: info@iaba.ie W: www.iaba.ie

TO: SECRETARIES OF CLUBS, COUNTY BOARDS AND PROVINCIAL COUNCILS

Affiliation / Insurance 2017 / 2018

Dear Secretary,

I refer to Rule 1.1 as amended at Annual Convention to read - “Applications for affiliation or re-affiliation must be received by County Boards **not later** than 31st May, by Provincial Councils **not later** than 30th June and by the National Association **not later** than 31st July to ensure voting rights at the Annual Conventions of County Boards, Provincial Councils and the Association “.

Fees for 2017/2018 are - Affiliation €15 Insurance €650 Total €665.

We regularly review our insurance arrangements to ensure that our members are sufficiently protected and that the premiums charged remain competitive and fair to all our clubs.

Although we have been able to negotiate to maintain the level of premiums charged for the last 2 years, due to increasing insurance costs, we need to make sure that insurance premiums accurately reflect insurance costs.

Please refer to the attached note which indicates a brief summary of cover.

Affiliation Fee broken down as follows: Provincial Councils €5, County Boards €5, Boxing Council €5

The Association asks that *County Boards kindly check that all forms are filled out fully, clearly and correctly by clubs making special note that the sections declaring Child Protection Officers is completed and that the Declaration has been signed.*

Also we ask that Provincial Councils also check this has been completed before sending on to the National Stadium, Dublin as all **incomplete forms will be returned directly to clubs.**

Kindly use the Affiliation Form enclosed.

Best Regards

Al Morris
Hon. Secretary Boxing Council IABA Ltd



AFFILIATION FORM 2017/2018

- **ALL SECTIONS OF THIS DOCUMENT MUST BE COMPLETED IN BLOCK CAPITALS.**
- ***All uncompleted forms will not be processed and will be returned directly to your Club.***
- ***For any queries on vetting contact David Britton david@iaba.ie and any questions on completion of affiliation please contact Eimear Griffin eimear@iaba.ie***

9th May 2017

We, the undersigned, hereby apply to have:

_____ Boxing Club affiliated to and insured by the Irish Athletic Boxing Association for the year 2017/2018

The appropriate fee as required by the rules of the Association is enclosed herewith. In the event of our affiliation being accepted we agree to abide by the rules of the I.A.B.A.

By completing and submitting this Form the above Club consent to the I.A.B.A. recording and storing all information contained within this document for operational purposes. This information will be stored in accordance with Data Protection Legislation and will not be shared with any inappropriate third Party.

All information in the "About Your Club" will be shared on the IABA website to help new perspective members locating and joining your club.

For further information concerning Data Protection see www.dataprotection.ie.

Check List:

- | | |
|--|--------------------------|
| Filled in each section correctly & fully | <input type="checkbox"/> |
| List of all officers | <input type="checkbox"/> |
| List of all coaches, Volunteers & boxers | <input type="checkbox"/> |
| Fee | <input type="checkbox"/> |
| Financial Statement | <input type="checkbox"/> |

About Your Club

Name of Club: _____

Year Established: _____

Number of Members: _____

Club Premises Address: _____

Club Colours: _____

Telephone: _____ **Email:** _____

Does Your Club OWN PREMISES? RENT PREMISES? LEASE PREMISES?

Club Website: www. _____

Club Social Media Accounts:

Facebook _____ Instagram _____ Twitter _____

Days of Training & Times _____

Officer/Committee Information

President's Name: _____ **(Signed):** _____

Presidents' Postal Address: _____

Telephone: _____ **Email:** _____

Secretaries Name: _____ **(Signed):** _____

Postal Address: _____

Telephone: _____ **Email:** _____

Treasurer's Name: _____

Postal Address: _____

Telephone: _____ **Email:** _____

Child Protection Officer's Name: _____

Postal Address: _____

Telephone: _____ **Email:** _____

Declaration

NOTE

It is the responsibility of the Committee to ensure all members are familiar with the Rules and policies of the I.A.B.A. It is also the responsibility of the Club to ensure that all members have completed and signed the appropriate membership and consent forms. For further information regarding this please see www.iaba.ie or contact 014533371.

Note: As from 25th July, 2012 it is a condition of Affiliation with the Irish Athletic Boxing Association Ltd that the following must be signed by each Unit.

We at _____ (Insert Name of Boxing Club) confirm that there are no incidents or accidents or allegations of an incident or accident including abuse or bullying allegations that may lead to a claim other than incidents/claims already reported.

We have confirmed this with all current committee members and coaches involved with

_____ (insert name of Boxing Club)

Signed on behalf by: _____ Date: _____

(Forms without the above section completed will be returned)

Note: Name of opponents of 2 boxers must accompany this form, plus a Financial Statement.

LIST OF 2 BOXERS WHO COMPETED DURING SEASON 2015/2016

	BOXER	OPPONENT	CLUB	DATE
1.
2.

Clubs are reminded that the Meeting of the Central Council on December 17th 2005 decreed that ALL members of the Association MUST have signed the Members Acknowledgement (Waver Form).

Irish Athletic Boxing Association,
National Boxing Stadium,
South Circular Road,
Dublin 8.

(Official Purposes Only)

I certify that the above information is correct and hereby accept the Nomination:

County Board Received by:

Date:

Approved Yes No, state why _____

Provincial Board Received by:

Date:

Approved Yes No, state why _____

IABA Head Office Received by:

Date:

Approved Yes No, state why _____



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IMPORTANT VETTING INFORMATION RE: AFFILIATION:

Dear Secretary,

All adult volunteer members of your club in relevant work meaning, they have regular access to Children and/or Vulnerable Adults **MUST** partake in the Vetting process. This is required by law and is in line with the best practice within our organisation.

The legislation together with the IABA's Vetting Policy means that vetting is mandatory for all members in relevant work. The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016 together with the Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016 Part 3 provides the legal framework for persons working in relevant work to undergo a vetting check prior to working with young people or vulnerable adults.

It is the responsibility of the **Club's Committee** to make sure that all adult volunteer members with regular access to children and/or vulnerable adults partake in the vetting process.

Thanks to the hard work of many of our clubs and volunteers there has been great progress made to our vetting system over the last 12 months, with over 650 Vetting applications being processed in this period. It is of the utmost importance that this good work continues and that all clubs engage with this legal requirement and IABA policy.

Failure by any member who meets the criteria of being in relevant work to partake in the Vetting process will disbar that member from participating in club activities and could affect the club's affiliation for season 2017/18.

- All Garda Vetting forms should be submitted directly by the applicant or the applicants club to **David Britton, The National Stadium, South Circular Road, Dublin 8.**
- For any enquiries regarding the Access NI process in Antrim, Armagh and Down please contact:

Sean O'Hare – Tel: [07793246275](tel:07793246275) Email: sean@iaba.ie

- For any enquires regarding the Access NI process in Derry, Tyrone and Fermanagh please contact:

Nicky Flanagan – Tel: [07885467208](tel:07885467208) Email: nicky@iaba.ie

Sincerely,



David Britton
National Child Protection Officer
david@iaba.ie
0860453904

Directors: Joe Christle, Pat Ryan, Des Fitzgerald, Ciaran Kirwan, Dr Joe McKeever, Kevin Duffy, Joe Herson,
David Kearns, Bernadette Harold & Gerry O'Mahoney
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