



TRAINER INFORMATION

Trainers wishing to support contestants and promoters as part of Boxing and Martial Arts events may apply to the Minister to be registered under Part 8 of the *Boxing and Martial Arts Regulations 2015*.

Applications must be made in a manner and form determined by the Minister, must be accompanied by documents and information the Minister may require to determine the application and must be accompanied by the prescribed fee.

Trainers should ensure contestants in their care who are intending to compete either in South Australia or elsewhere have undertaken required medical examinations or tests and are registered as a contestant.

Trainers should ensure the health and safety of contestants in their care is paramount and that they are provided with a certificate of fitness before competing.

Trainers who are registered, subject to any other law or the rules applicable to the sport, may do any or all of the following:

- Enter the ring in which a professional or public boxing or martial event is occurring during breaks in the event
- Provide medical or other direct support to a Contestant in a professional or public boxing or martial event during breaks in the event
- Stop or suspend (however described) a professional or public boxing or martial event on behalf of a contestant in the event

Change to or Cancellation of your Registration

Your registration as a Trainer remains active unless the Minister decides to vary or revoke it for any reason the Minister thinks fit. If this occurs, you will be notified in writing.



TRAINER REGISTRATION

Registrations will not be finalised unless ALL details and questions are completed, required documents attached and accompanied by a receipt for direct payment of the required fee.

1. Application Fee - \$55.50

Electronic Funds Transfer to:

Name: DPC Operating A/C Receivable
BSB: 065 266
Account: 1001 9370

Reference: (Your Surname) BMA-ORSR

Proof of payment must be submitted with your application.

The application fee is non-refundable in the event that your application is withdrawn by you or is not approved.

2. Proof of Identity

You are required to provide a certified copy of photo identification. This can be in the form of a driver's licence, passport, proof of age card or student identification card.

Your identity document can be certified as 'a true copy of the original document' by a Justice of the Peace (JP), lawyer, teacher, Commonwealth or State Government employee or an employee of Australia Post.

3. A National Police Certificate

The certificate must be no more than three (3) months old preceding the date of lodgement of the trainer application.

To obtain this certificate you need to apply directly to the South Australia Police or an ACIC registered agency.

Your Certificate can be certified as 'a true copy of the original document' by a Justice of the Peace (JP), lawyer, teacher, Commonwealth or State Government employee or an employee of Australia Post.

4. Working with Children Check

All people doing child-related work, which includes providing sport and recreation services and activities, must have a Working with Children Check.

You can apply for this online at: <https://screening.sa.gov.au/home>

If you reside outside South Australia you must hold the equivalent check from your State or Territory.



LODGEMENT OF COMPLETED APPLICATION

Please return your completed application form, relevant documents and receipt of payment to:

By Email:

ORSR.CombatSports@sa.gov.au

By Post:

Office for Recreation, Sport and Racing
PO Box 219
Brooklyn Park SA 5032

In Person:

Office for Recreation, Sport and Racing
27 Valetta Road
Kidman Park SA 5025

IMPORTANT INFORMATION

A copy of the *Boxing and Martial Arts Act 2000* and *Boxing and Martial Arts Regulations 2015* can be obtained at www.legislation.sa.gov.au



TRAINER REGISTRATION FORM

Issued under the *Boxing and Martial Arts Act 2000* and the *Boxing and Martial Arts Regulations 2015*

Incomplete registration forms will be returned to the applicant.

APPLICANT DETAILS					
FULL NAME:					
DATE OF BIRTH:					
SEX:	FEMALE <input type="checkbox"/>	MALE <input type="checkbox"/>			
RESIDENTIAL ADDRESS:					
SUBURB:		STATE:		P/CODE:	
POSTAL ADDRESS:					
SUBURB:		STATE:		P/CODE:	
CONTACT NUMBER:					
EMAIL ADDRESS:					
NAME OF GYM:					

Q1 Do you have, or have you held a Trainer's registration in South Australia?

Yes

No

Q2 Have you ever held a Trainer's registration (or its equivalent) in another State, Territory or country?

Yes

Where: _____

No

Q3 Have you ever been disciplined by or had your registration with any combat sports authority suspended or cancelled?

Yes

No

If yes, please provide details:



Q4 Have you ever been convicted of an offence (other than a traffic offence) or are any court proceedings pending against you?

Note: You are required to provide a National Police Certificate (or equivalent if you reside overseas) with your application.

- Yes No

If yes, please provide details:

Q5 Do you train any people under the age of 18 years?

- Yes No

If yes, please provide a current South Australian Working with Children Check (or your State or Territory equivalent)

Q5 Please list any accredited trainer or First Aid qualifications:

Certificate/Accreditation:

Expiry:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Q6 Statement of Experience:



APPLICANT'S DECLARATION

I, _____, do solemnly and sincerely declare that:

- I have read the *Boxing and Martial Arts Act 2000* and *Boxing and Martial Arts Regulations 2015* and understand my legal obligations if my application is approved;
- The information I have provided in this application form and attachments are true and correct; and
- I understand that providing false or misleading information is an offence under section 18 of the *Boxing and Martial Arts Act 2000*.

I authorise the Minister for Recreation, Sport and Racing to make any inquiries necessary for the purpose of determining this application.

I acknowledge that information contained in this form may be made available to interstate recognised authorities.

PERMISSION TO RETAIN AND DISCLOSE PERSONAL INFORMATION

I give permission to the Office for Recreation, Sport and Racing to retain my personal registration details in the Boxing and Martial Arts database for use by the Office for Recreation, Sport and Racing to administer the Act.

I approve the Office for Recreation, Sport and Racing disclosing such details to other recognised authorities in Australia and elsewhere for the purposes of assisting the Boxing and Martial Arts industry to maintain integrity and participants safety.

Signed: _____ Date: ____ / ____ / ____

Print Name: _____