T11 FORM

Office use only





## **England Boxing Accident and Emergency Notice**

**To: - The Medical Officer, Accident and Emergency Department** 

<u>Boxers</u>	Details:
Name:	
Addres	s:
	Post Code:
Telepho	one:
During	an Amateur Boxing Contest that took place at
Today	the above named boxer was
1.	Knocked out by a blow to the head / body
2.	Sustained the following injuries:
Signed	(MEDICAL OFFICER)
Date:	Time: