Meldebogen Hallen-Kinderturnfest 2024

Textfelder bitte lesbar ausfüllen! Dazu Blockschrift oder Computer verwenden!

**Kontaktadresse:**

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| Name: |  |
| Straße, PLZ Ort: |  |
| Telefon / e-mail: |  |
| Verein: |  |

|  | **Wettkampf Nr.** | | **Vorname** | | **Nachname** | | **Alter** | |
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| **Nr.** | **Name der Kampfrichterin / des Kampfrichters** | **Nr.** | **Name der Kampfrichterin / des Kampfrichters** |
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| 3 |  | 7 |  |