**Wettkampf:**

Verein:

**Ansprechpartner Verein:**

**Kampfrichter:**

1. Name: 3. Name:
Email: Telefon/Mobil: Email: Telefon/Mobil:
eventuell Wunschgerät: eventuell Wunschgerät:
2. Name: 4. Name:
Email: Telefon/Mobil: Email: Telefon/Mobil:
eventuell Wunschgerät: eventuell Wunschgerät:

**Turnerinnen:**

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| --- | --- | --- | --- | --- | --- | --- |
|  | **Name** | **Vorname** | **Jahrgang** | **Wettkampfnummer** | **Mannschaft****(bei Mannschaftswettkampf)** | **Startpassnummer oder****ID – Nummer**  |
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