**Meldeformular - Deutsche Halb Marathon Meisterschaft in der Para Leichtathletik 2019 des DBS**

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| Meldeschluss | | Sonntag, 07.03.2019 |  | Landesverband: | |
| Veranstaltung in: | | Berlin |  |  | |
| Termin: | | 07.04.2019 |  |  | |
| Verein: |  | | Ansprechpartner: |  |
| Strasse: |  | | PLZ / Ort: |  |
| Telefon: |  | | E-Mail: |  |



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| --- | --- | --- | --- | --- | --- | --- |
| **Startpass - Nummer** | **SDMS- Nr** | **Name, Vorname** | **Sex** | **Geburtsdatum** | **Start-klasse** | **Alters-klasse** |
| **00000** | **11111** | **Mustermann, Fritz** | **M / W** | **01.01.85** | **TF20** | **M** |
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**Summe** **EURO\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Stempel / Unterschrift Verein