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| **Ansprechpartner im Verein:** | Name: |  | E-Mail: |  | Tel.: |  |

**Kampfrichtermeldung**

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| Vor- und Nachname | Stufe | E-Mailadresse | Einsatztag | Ggf. Einsatzwunsch |
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**Teilnehmermeldung**

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| Lfd | **Vor- und Nachname** | **Jahr-gang** | **Verein** | **Wettkampfklasse** | **ggf. Abzeichenstufe** | | **Radgröße** in cm | | |
| Nr. | **Spirale** | **Sprung** | **Ger** | **Spi** | **Spr** |
| zB | Max Mustermann | 1900 | VfL Musterstadt | AK L13/14+  Spirale |  |  | 200 | 180 |  |
|  | Max Muster | 1900 | VfL Musterstadt | AK 11/12 | Stufe 2/ 3 | Stufe 4/1 | 200 | 170 | 170 |
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Ort, Datum Unterschrift