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 ***Anmeldung***

 ***Shooty – Cup 2024***

Verein

Jugendleiter

Telefon

E-Mail

 Name Vorname Geb.-Datum Schützenpass-Nr. Disziplin

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 🞎 Ich bin damit einverstanden, aus Kostengründen die Startzeiten per E-Mail zu erhalten.

 (Betrifft auch Bezirksdurchgang)