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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)