**Заявка на участие в спортивной эстафете**

**«Осеннее путешествие»**

**от команды**

**название команды**

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**ФИО и контактный телефон капитана команды**

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**цвет команды**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **№ п/п** | **ФИО** | **Год рождения** | **Курс** | **Допуск врача** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |

Подпись и печать врача: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_