**XIV BIEG KONSTYTUCJI 3 MAJA**

**WĄBRZEŹNO 2017**

**KARTA ZGŁOSZENIOWA do Biegu Rekreacyjnego**

Nazwisko Imię

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Kod Miejscowość Wiek

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Ulica Nr domu Data urodzenia

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**Oświadczam, że jestem zdrowy i posiadam aktualne badania lekarskie oraz**

**przyjmuje na siebie odpowiedzialność za stan zdrowia w powyższej imprezie** Wypełnia organizator

Podpis uczestnika………………………………………........... Płeć

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Podpis uczestnika………………………………………........... Płeć

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Kod Miejscowość Wiek

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Ulica Nr domu Data urodzenia

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**przyjmuje na siebie odpowiedzialność za stan zdrowia w powyższej imprezie** Wypełnia organizator

Podpis uczestnika………………………………………........... Płeć

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