

Registration form: Sanda



Gara: 1° Shaolin European Competition
Luogo: Palazzo del Turismo - Jesolo Lido (Venezia)
Data: 03/11/2019

NAME OF SCHOOL	
PHONE NUMBER	
EMAIL	
ADDRESS	

JUA: 2003-2004 JUB: 2002 Class: AD: 1984-2001

Kg: MA - 42 - 45 - 48 - 52 - 56 - 60 - 65 - 70 - 75 - 80 - 85 - 90 + 90

Kg: FE - 42 - 45 - 48 - 52 - 56 - 60 - 65 - 70 - 75

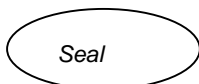
N.	Surname Name	D.O.B.	M	F	Class	Weight	Notes
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School Director _____

Coach: _____ **Trainer:** _____

I, the undersigned _____, as legal representative of the Sports Association hereby declare under my full responsibility that the aforementioned athletes are properly registered at the Sports Association and in possession of a valid health certificate and medical insurance as required by the competition and by their own Nation.

Date and Place



Society President