 **23nd IBSA NINE PIN BOWLING EUROPEAN CHAMPIONSHIP**

 **FOR BLIND AND VISUALLY IMPARIED – 11 – 18.05.2024 r.**

 **Sierakow- POLAND.**

 **Final entry form**

**NATIONAL ORAGANIZATION:**

**Address:**

**Contact person:**

**Telephone:**

**E-mail:**

**Team Competition – MEN**

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| **CAT.** | **Name** | **Surname** | **Date of birth** | **Passport No.** | **T-shirt Size** |
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**Team Competition – WOMEN**

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| **CAT.** | **Name** | **Surname** | **Date of birth** | **Passport No.** | **T-shirt Size** |
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**Notes:**

* **Substitutions for team event can be decided on the Technical meeting**
* **Member of the Team can be changed on the Technical meeting**

**Individual – MEN**

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| **CAT.** | **Name** | **Surname** | **Date of birth** | **Passport No.** | **T-shirt Size** |
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**Individual – WOMEN**

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| **CAT.** | **Name** | **Surname** | **Date of birth** | **Passport No.** | **T-shirt Size** |
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**Technical Staff**

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| **Name** | **SURNAME** | **Date of birth** | **Assignment** | **M/F** | **Passport No.** | **T-shirt Size** |
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