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| --- |
| **Please send the form to echbolognatolmezzo2019@gmail.com** |
| **FINAL ENTRY FORM** | **Rifle and Pistol - Mixed Team M / W** | **Please return by** | **13 AUG 2019** | **to OC** |
| name of federation |  | nation code |  | **echbolognatolmezzo2019@gmail.com** |
| contact person |  | phone number |  |
| e-mail address |  | fax number |  |
|  |
| **no** | **athletes** | **date of birth** | **event / team** |
| **family name** | **first name** | **ISSF ID number** | **DD** | **MM** | **YY** |
|  |  |  |  |  |  |  | 50m Rifle Prone Mixed Team |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  | 50m Pistol Mixed Team |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  | 25m Standard Pistol Mixed Team |
|  |  |  |  |  |  |