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| **FINAL ENTRY FORM** | | | | **Officials** | | **Please return by** | | | | | **24 JUL 2022** | | | | **to ISSF Headquarters** |
| name of federation | | |  | | | nation code | | |  | | | | | | Widenmayerstrasse 16  80538 Munich, GermanyPhone: +49-89-544355-0  Fax:+49-89-544355-44  E-mail: [willi@issf-sports.org](mailto:willi@issf-sports.org) |
| contact person | | |  | | | phone number | | |  | | | | | |
| e-mail address | | |  | | | fax number | | |  | | | | | |
|  | | | | | | | | | | | | | | | |
| **no** | **gender**  **M=men W=women** | **officials** | | | | | | **date of birth** | | | | | | **position**  **(for identification please use legend below)** | |
| **family name** | | | **first name** | | | **DD** | | **MM** | | **YY** | |
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|  | | | | | | | **Legend:**  Team Leader  Team Coach  Team Medical Personnel  Team Official  Media Person | | | | | |  | For Media please use also “Media Accreditation Form” | | |