# 2017湖南省健身气功大赛总决赛报名表

单位(盖章)代表队:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

领队:\_\_\_\_\_\_\_\_\_\_\_\_\_、 教练:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **队员** | **姓名** | **年龄** | **性别** | **民族** | **身份证号码** | **气舞名称** |
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联系人: 联系电话:

(此表可加页、可复印)