|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *„WARTBURGSCHÜTZENKREIS“ E.V.* | | | | | | | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Teilnehmermeldung für die Kreismeisterschaften 2016** | | | | | | | | | | | | | | | | | | |
| **KK – Sportgewehr 3 x 20; KK – Freigewehr 3 x 40;**  **KK – Liegendkampf** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **An** | | | | | | | |  | | **Vereinsname:** | | | |  | | | | | | | | | |
| **Wettkampfleitung** | | | | | | | |
| **Sven Vesper** | | | | | | | | **Verantwortlicher:** | | | |  | | | | | | | | | |
| **Riedhügel 12** | | | | | | | |
|  | | | | | | | | **Straße:** | | | |  | | | | | | | | | |
| **36456** | | **Barchfeld - Immelborn** | | | | | |
|  | | | | | | | | **PLZ / Ort:** | | | |  | | | |  | | | | | |
|  | | | | | | | |
| **E-Mail:** | | **sven.vesper@t-online.de** | | | | | | **E-Mailadresse:** | | | |  | | | | | | | | | |
|  | | | | | | | |
| **Telefax:** | | **036961 - 69423** | | | | | | **Telefaxnummer:** | | | |  | | | | | | | | | |
|  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Wettk. Nr.:** | | | **13** | **Termin:** | | **20.–22. Mai 2016** | | **Ort:** | | **Bad Salzungen OT K’born** | | | | | | **Meldung bis:** | | | | | **30.04.2016** | | |
| **Meldung zur Teilnahme an der Landesmeisterschaften bei Sven Vesper bis spätestens:** | | | | | | | | | | | | | | | | | | | | | **19.05.2016** | | |
| **Nr.** | **Name** | | | | **Vorname** | | **Geburts-jahr** | | | | **Er-gebnis VM** | **Kenn-zahl SpO** | | | **Einzel-wert.** | | **Mann**  **schaft** | | | **Gem. Waffe** | | **Teilnahme an TLM** | |
| **Ja** | **Nein** |
| **1** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **2** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **3** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **4** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **5** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **6** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **7** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **8** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **9** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **10** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **11** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **12** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **13** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **14** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
| **15** |  | | | |  | |  | | | |  |  | | |  | |  | | |  | |  |  |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Ort, Datum:** | | |  | | | | | | **Unterschrift:** | | | |  | | | | | | | | | | |