## ANMELDEFORMULAR FÜR VEREINE / SCHULEN / FIRMEN FÜR DIE TEILNAHME AM HERBSTLAUF WALDKRAIBURG 2017

| Verein / Schule / Firma |  |
|-------------------------|--|
| Ansprechpartner         |  |
| E-Mailadresse           |  |
| Telefon                 |  |
|                         |  |

| Name, Vorname | <u>Geburtsjahr</u> | Nationalität | <u>Laufstrecke</u> |  |
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