**全国第二届青年运动会射箭预赛报名表**

参赛单位（盖章）：

联 系 人： 联系电话：

电子邮箱：

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| **姓名** | **性别** | **出生日期** | **民族** | **人员类别** | **备注** |
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**注：参赛单位需经所在省级体育行政部门登记或备案同意后，方可报名参加比赛。请报名时将省级体育行政部门同意文件以附件形式同时发送至邮件。**