附件1：

**2023-2024赛季全国高山滑雪锦标赛暨“十四冬”资格赛报名表**

|  |  |  |
| --- | --- | --- |
| **报名单位全称：**  |  | **报名单位（加盖公章）： 医疗机构（加盖公章）：** |
| **报名单位所属省市：**  |  | 　 |
| **领队信息** |
| **序号** | **姓名** | **性别** | **身份证号** | **手机号** |
| 1 |  |  |  |  |
| **教练员信息** |
| **序号** | **姓名** | **性别** | **身份证号** | **手机号** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| **队医信息** |
| **序号** | **姓名** | **性别** | **身份证号** | **手机号** |
| 1 |  |  |  |  |
| **参赛运动员信息** |
| **序号**  | **姓名** | **性别** | **身份证号** | **出生日期** | **运动员手机** | **参赛项目（Y）** |
| **回转** | **大回转** | **超级大回转** | **滑降** | **全能** |
| **参赛组别--男子组** |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |

**2023-2024赛季全国高山滑雪锦标赛暨“十四冬”资格赛报名表**

|  |
| --- |
| **参赛组别--女子组** |
| **序号**  | **姓名** | **性别** | **身份证号** | **出生日期** | **运动员手机** | **参赛项目（Y）** |
| **回转** | **大回转** | **超级大回转** | **滑降** | **全能** |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |

**报名单位（加盖公章）**