**附件六：**

**腰旗橄榄球赛报名表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 队名称&地市 | |  | | 参赛组别 |  | | | |
| 主教练 | |  | | | 电话 | | | |
| 领队 | |  | | | | 电话 | | |
| 序号 | 运动员  姓名 | 出生  年月 | 年龄 | 身份证号码 | | | 球衣  号码 | 运动员照片（一寸白底照） |
| 1 |  |  |  |  | | |  |  |
| 2 |  |  |  |  | | |  |  |
| 3 |  |  |  |  | | |  |  |
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| 9 |  |  |  |  | | |  |  |
| 10 |  |  |  |  | | |  |  |
| 11 |  |  |  |  | | |  |  |
| 12 |  |  |  |  | | |  |  |

**注：**以上填报内容必须准确、完整，填写不完整视为报名无效。

**飞盘赛报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 队伍名 | 姓名 | 性别 | 年龄 | 队内身份  （队内有兼任身份的需同时勾选） | | | | 背号 | | 国籍 | | 证件  类型 | | 证件号码 | | 手机号 | | 队员照片  （一寸白底） | |
| 领队 | 队长 | 精神队长 |  | |  | |  | |  | |  | |  | |
| 1 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
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| 3 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| 4 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| 5 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| 6 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| 7 |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
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**注：**以上填报内容必须准确、完整，填写不完整视为报名无效。

**2024年中国轮滑（自由式轮滑）**

**公开赛（珠海站）报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 请将报名表以附件、标题为队名+报名表或音乐发送电子邮件至： 联系人：黄老师 电话：15913600965（同微信）邮箱：1587199129@qq.com  若轮舞项目组织多队伍参加，请填写报名表时上人员以A和B区分 | | | | | | | | | | | |
| 参赛队伍 | （省+市+队伍名称，例如：XXX省XXX市XXXX自由式轮滑代表队） | | | | | | | | | | |
| 地址 |  | | | | | | | | | | |
| 领队 |  | | | 联系  电话 |  | | | | | | |
| 教练 |  | | | 联系  电话 |  | | | | | | |
| 姓名 | 性别 | 组别 | 身份  证号 | 速度过桩 | 花式绕桩 | 双人花式绕桩 | 花式对抗 | 平地跳高 | 花式刹停 | 轮舞 | 备注 |
|  |  | 青年乙组 |  |  |  |  |  |  |  |  |  |
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| ※若参赛人员众多，可自行编辑此表格。 ※身份证号必须填，不填将视为成年组。 ※音乐备注，地址必须填写。 | | | | | | | | | | | |
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**2024年中国轮滑(速度轮滑）**

**公开赛（珠海站）报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 请将报名表以附件、标题为队名+报名表发送电子邮件至: 联系人:黄老师 电话:15207501782(同微信) 邮箱:3317676028@qq.com | | | | | | | | | | | | |
| 参赛队伍 | （省+市+队伍名称，例如：XXX省XXX市XXXX轮滑代表队） | | | | | | | | | | | |
| 地址 |  | | | | | | | | | | | |
| 领队 |  | | | 联系电话 |  | | | | | | | |
| 教练 |  | | | 联系电话 |  | | | | | | | |
| 序号 | 必填基本信息 | | 信息 | |  | 项目（参加打√） | | | | | | |
| 运动员 | 身份证号 | 出生年月 | 组别 | 性别 | 200米计时赛 | 300米计时赛 | 500米+D争先赛 | 1000米争先赛 | 5000米淘汰赛 | 5000米积分赛 | 3000米接力赛 |
| 示例 | 张某某 | 231223201809240000 | 20180924 | 成年组 | 女子 |  |  | √ | √ |  |  |  |
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| 13 |  |  |  |  |  |  |  |  |  |  |  |  |

**2024年U系列中国青少年轮滑巡回赛-珠海站(自由式轮滑、迷你轮滑马拉松、轮滑拉龙)报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 请将报名表以附件、标题为队名+报名表或音乐发送电子邮件至： 联系人：蒋老师 电话：15917829366 （同微信）邮箱：857543488@qq.com | | | | | | | | | |
| 参赛队伍 | （省+市+队伍名称，例如：广东省珠海市XXXX U系列轮滑代表队） | | | | | | | | |
| 地址 |  | | | | | | | | |
| 领队 |  | | | 联系电话 |  |  | | | |
| 教练 |  | | | 联系电话 |  |  | | | |
| 姓名 | 性别 | 组别 | 身份证号 | 速度过桩 | Cross绕桩竞速 | Fish绕桩竞速 | 迷你轮滑马拉松 | 轮滑拉龙 （团体报名，填写按P1/P2区分） | 备注 |
|  |  |  |  |  |  |  |  |  |  |
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| ※若参赛人员众多，可自行编辑此表格。 ※身份证号必须填，不填将视为成年组。 ※音乐备注，地址必须填写。 | | | | | | | | | |