**«ОДЕССКАЯ БАСКЕТБОЛЬНАЯ ЛИГА им. ВИТАЛИЯ РАДОВА»**

**СЕЗОН 2020/2021 гг.**

**ЗАЯВКА НА УЧАСТИЕ**

**КОМАНДА \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **№ п/п** | | **Фамилия,**  **имя и отчество** | **Дата рождения** | **Амплуа** | | | Рост | Вес | | Медицинский допускподпись врача |
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| **ТРЕНЕРСКИЙ СОСТАВ** | | | | | | | | | | |
| **1** |  | |  | |  | **Главный тренер** | | |  |  |
| **2** |  | |  | |  | **Первый тренера** | | |  |  |

# Руководитель команды \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# (подпись) (Фамилия, инициалы)

# Главные тренер команды \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# (подпись) (Фамилия, инициалы)

**Врач допущено \_\_\_\_\_\_ человек \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(словами, разборчиво) (подпись) М.П. (фамилия, инициалы, разборчиво)