ENTRY FORM Cross Country Skiing- Roller Ski FORMULAIRE D'INSCRIPTION Ski de fond - Ski a roulette ANMELDEFORMULAR Langlauf – Rollerski

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| **Competition (Name/Place)** Manifestation (Nom/Lieu) Veranstaltung (Name/Ort) | **FIS Roller Ski Asian Cup (Schuchinsk, Kazakhstan)** | | **Date of race**  Date de la course Datum des Wettkampfs | | | | **04-07.09.2025** | |
| **National Association** Fédération Nationale Nationaler Verband |  | | | | | Cat. | WC | FIS |
|  | **X** |
| **Responsible for entry**  *Responsable de l'incription*  Für die Meldung verantwortlich | |  | | Tel |  | | | |
| e-Mail |  | | | |

**COMPETITORS**/COUREURS/WETTKÄMPFER

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| **FIS Code** *Code FIS* FIS Code | **Surname, First Name** *Nom de famille, Prénom* Familienname, Vorname | **YB** AN JG | **Gen** | | **Binding** | | **Formats** | | | | | | |
| **M** | **W** | **NNN** | **SNS** | **Sprint C 1.2 km** |  | **Interval F 5 / 10** |  | **Sprint F 200 m** |  | **Mass C 16 / 20** |
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| **Place, Date**  Lieu, Date  Ort, Datum |  | **Signature**  Signature  Unterschrfit |  |

**Block letters please! /** Ecrire en majuscules s.v.p. / Bitte in Blockschrift schreiben!



**COMPETITORS**/COUREURS/WETTKÄMPFER

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| **Surname, First Name**  Nom de famille, Prénom  Familienname, Vorname | **Function**  Fonction Funktion | **Arrival**  Arrivée  Anreise | **Departure**  Départ  Abreise |
|  | **Team Captain**  Chef d'équipe  Mannschaftsführer |  |  |
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|  | **Trainer** Entraîneur Trainer |  |  |
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|  | **Doctor** Médecin Arzt |  |  |
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|  | **Physiotherapist** Masseur Masseur |  |  |
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|  | **Technicians** *Techniciens* Techniker |  |  |
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|  | **Service personnel** Personnel de service Servicepersonal |  |  |
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| **Place, Date**  Lieu, Date  Ort, Datum |  | **Signature**: Signature:  Unterschrfit: |  |

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