附件一

**2025年济南市槐荫区青少年射击锦标赛**

**暨济南市第一届运动会槐荫区射击队选拔赛**

**报名表**

单位（章）：

领队： 教练： 联系电话：

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| 序号 | 姓名 | 性别 | 组别 | 出生年月 | 光电步枪 | 光电手枪 | 混合团体 | 备注 |
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注：请在需要报的项目内打“√”