|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **„WARTBURGSCHÜTZENKREIS“ E.V.** | | | | | | | | | | | | | | | *WSK Emblem 2012.jpg* | | |
|  | | | | | | | | | | | | | | |
| **Teilnehmermeldung 2025** | | | | | | | | | | | | | | |
| **Kreisschützenmeister – Pokal für Senioren** | | | | | | | | | | | | | | |
| **1.11. -** | | **Luftgewehr – Auflage** | | | |  | | |  | | | | | |  | |  |
|  | |  | | | |  | | |  | | | | | |  | |  |
|  | |  | | | |  | | |  | | | | | |  | |  |
|  | | | | | | | | | | | | | | | | | |
| **An** | | | | | |  | | | **Vereinsname:** | |  | | | | | | |
| **Wettkampfleitung** | | | | | |  | | |
| **KSM Reinhard Wilhelm** | | | | | |  | | | **TSB-Vereinsnr.:** | |  | | | | | | |
| **Eisenacher Straße 5** | | | | | |  | | |
|  | |  | | | |  | | | **Verantwortlicher:** | |  | | | | | | |
| **36460** | | **Krayenberggemeinde** | | | |  | | |
|  | | **OT Dorndorf / Rhön** | | | |  | | | **Straße:** | |  | | | | | | |
|  | |  | | | |  | | |
|  | | [**r-wilhelm@web.de**](mailto:r-wilhelm@web.de) | | | |  | | | **PLZ / Ort:** | |  | | |  | | | |
| **E-Mail:** | |  | | |
|  | |  | | | **E-Mail-Adresse:** | |  | | | | | | |
|  | |  | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| **Termin:** | | **30. März 2025** | | | **Ort:** | **Barchfeld – Immelborn** | | | | | **Meldung bis:** | | | | | **08.03.2025** | |
|  | | | | | | | | | | | | | | | |  | |
| **Nr.** | **Name** | | | **Vorname** | | | **Geburts-jahr** | | | **Kennzahl DSB-SpO** | |  | | | | | **Bemerkung** |
| 1 |  | | |  | | |  | | |  | |  | | | | |  |
| 2 |  | | |  | | |  | | |  | |  | | | | |  |
| 3 |  | | |  | | |  | | |  | |  | | | | |  |
| 4 |  | | |  | | |  | | |  | |  | | | | |  |
| 5 |  | | |  | | |  | | |  | |  | | | | |  |
| 6 |  | | |  | | |  | | |  | |  | | | | |  |
| 7 |  | | |  | | |  | | |  | |  | | | | |  |
| 8 |  | | |  | | |  | | |  | |  | | | | |  |
| 9 |  | | |  | | |  | | |  | |  | | | | |  |
| 10 |  | | |  | | |  | | |  | |  | | | | |  |
|  | | | | | | | | | | | | | | | | | |
| **Ort, Datum:** | | |  | | | | | **Unterschrift:** | | | | |  | | | | |