

Please submit this form to the Organizing Committee upon arrival during the Registration Process, but not later than 15:00h on the day before the Mixed Team Event is scheduled.

| FINAL ENTRY FORM | Mixed Team | Organizing Committee |
|--------------------|------------|--|
| name of federation | | Russian Shooting Union Luzhnetskaya nab., 8 119991, Moscow, Russian Federation |
| contact person | | Phone: +7-495-637-92-32 Mobile: +7-915-356-44-29 E-mail: <u>info@wch2017russia.org</u> |

event

Team 1

| no | gender | family name | first name | BIB number |
|----|--------|-------------|------------|-------------------|
| 1 | | | | |
| 2 | | | | |

Team 2

| no | gender | family name | first name | BIB number |
|----|--------|-------------|------------|-------------------|
| 1 | | | | |
| 2 | | | | |

Date, Time

Name and Signature of Team Official