**PALAN EXTREME**

**INFORMATION FORM**

**UNIVERSITY:**

**FACULTY:**

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| **STUDENT COMPETITORS** |  | **NAME SURNAME** | **PHONE NUMBER** | **E-MAIL** | **ADDRESS** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| **TEAM COACH** | |  |  |  |  |
| **ASSISTANT STAFF** | |  |  |  |  |

**Competition Co-ordinators to get information;**

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| --- | --- | --- |
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