

IX TURNIEJ TAŃCA POLSKIEGO

O PALMĘ WILEŃSZCZYZNY

10 GRUDNIA 2023 r.

**KARTA ZGŁOSZENIA**

Reprezentowana instytucja, placówka, grupa artystyczna :

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Instruktor/instruktorzy par:

Nazwisko i imię: ............................................................................................................................

tel. kontaktowy: …………………………………………………………………………………………….

e-mail kontaktowy: …………………………………………………………………………………………….

**KATEGORIA STARTOWA**

| **L.p.** | **Nazwisko i Imię** | | **Data urodzenia** | **Kategoria startowa, klasa** |
| --- | --- | --- | --- | --- |
| **1.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **2.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **3.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **4.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **5.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **6.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **7.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **8.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **9.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **10.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **11.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **12.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **13.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **14.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **15.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **16.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **17.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **18.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **19.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |
| **20.** | **Partner** |  |  |  |
| **Partnerka** |  |  |  |