附件

2024年度拟选招运动员考试考核报名表

单位：（公章）

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| 序号 | 项目 | 姓名 | 出生年月 | 身份证号 | 现就读年级 | 参加考试级别 | 训练状态 |
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备注：“训练状态”一栏请填写拟进队或拟试训。

带队负责人： 联系电话： 填表时间：