POLISPORTIVE ASSOCIAZIONE NAZIONALE DI PROMOZIONE SPORTIVA

GIOVANILI

SALESIANE Sede nazionale. Via Nomentana 175 - 001615 ROMA – Tel. 06/4462179 – Fax 06/491310

|  |  |
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| Rimini 4 – 6 Novembre 2016 | DA COMPILARE IN STAMPATELLO |

### CORSO DI AGGIORNAMENTO PATTINAGGIO ARTISTICO

|  |  |
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| * **MODULO DI PREISCRIZIONE**
 | * **MODULO DI ISCRIZIONE**
 |
| da far pervenire entro il **31 agosto 2016** | da far pervenire entro il **30 settembre 2016** insieme alla copia del versamento/bonifico |

**IL SOTTOSCRITTO CHIEDE L’ISCRIZIONE AL CORSO DI AGGIORNAMENTO**

|  |  |  |
| --- | --- | --- |
| **cognome**  | **nome** | **Luogo di nascita**  |
|  |  |  |
| **data di nascita** | **Residenza** | **Via – n.** |
|  |  |  |
| **Telefono** | **E mail** | **P.G.S. di appartenenza** |
|  |  |  |
| **N. tessera PGS** | **Corsi frequentati** |
|  |  |

**ELENCO ATLETI PARTECIPANTI**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | COGNOME NOME | **ANNO DI NASCITA** | **CATEGORIA** | **N. TESSERA****PGS** |
| **01** |  |  |  |  |
| **02** |  |  |  |  |
| **03** |  |  |  |  |
| **04** |  |  |  |  |
| **05** |  |  |  |  |

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Data \_\_\_\_\_\_\_ Firma

**ELENCO PERNOTTANTI**

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|  | COGNOME NOME | **ARRIVO** | **PARTENZA** | **TIPOLOGIA CAMERA\*** |
| **ISTRUTTORE** |
| **01** |  |  |  |  |
| **ATLETI** |
| **01** |  |  |  |  |
| **02** |  |  |  |  |
| **03** |  |  |  |  |
| **04** |  |  |  |  |
| **05** |  |  |  |  |

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\* SINGOLA € 47,00 A PERSONA

 DOPPIA O TRIPLA € 37,00 A PERSONA