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|  | | | **36. Embracher Gruppenschiessen**  **26./27. April und 1. Mai 2019**  **Anmeldung** | | |  |
|  | Vereinsname: |  | | | |
|  | PLZ, Ort: |  | | | |
|  | Verantwortlicher:  Name: |  | | Vorname: |  |
|  | Adresse, PLZ, Ort: |  | | | |
|  | Telefon Privat: |  | | Telefon Geschäft: |  |
|  | E-Mail-Adresse: |  | | | |

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| Total angemeldete Schützen: |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Gruppenname:** | |  | | **Kat:** | **A Sport** | **E Ord.** | **J/JJ** |
|  | | | |  |  |  |  |
| **Nr.** | **Name** | | **Vorname** | | **Jahrgang** | **Lizenz Nr.** | |
| 1 |  | |  | |  |  | |
| 2 |  | |  | |  |  | |
| 3 |  | |  | |  |  | |
| 4 |  | |  | |  |  | |
| 5 |  | |  | |  |  | |

**Weitere Gruppen  2. Seite!**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Einzelschützen:** | |  | | | |
| **Nr.** | **Name** | | **Vorname** | **Jahrgang** | **Lizenz Nr.** |
| 1 |  | |  |  |  |
| 2 |  | |  |  |  |
| 3 |  | |  |  |  |
| 4 |  | |  |  |  |

**Rangeurvorbestellung (1 Stunde pro Gruppe, 12 min pro Schütze). Bitte nur, wenn unbedingt nötig wie lange Anreise, usw.**

**Wir möchten das Schiessen mit möglichst wenig Rangeurvorbestellungen durchführen**

|  |  |  |  |
| --- | --- | --- | --- |
| Datum | | Allg. Schiesszeit | Gewünschte Zeit |
| Freitag | 26. April 2019 | 17.30 – 20.00 |  |
| Samstag | 27. April 2019 | 08.30 – 13.00 |  |
| Mittwoch | 1. Mai 2019 | 08.30 – 12.00  13.30 – 15.30 |  |

**Anmeldung an: John Warpelin, Fluhgasse 149, 5080 Laufenburg, Tel. 079 788 82 11;   
 E-Mail-Adresse: gruppenschiessen@sv-embrach.ch**

**Die Anmeldungen werden in der Reihenfolge ihres Eingangs berücksichtigt.**

# Keine Gruppendoppel

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Gruppenname:** | |  | | **Kat.:** | **A Sport** | **D Ord.** | **J/JJ** |
|  | | | |  |  |  |  |
| **Nr.** | **Name** | | **Vorname** | | **Jahrgang** | **Lizenz Nr.** | |
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| **Gruppenname:** | |  | | **Kat.:** | **A Sport** | **D Ord.** | **J/JJ** |
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| **Nr.** | **Name** | | **Vorname** | | **Jahrgang** | **Lizenz Nr.** | |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Gruppenname:** | |  | | **Kat.:** | **A Sport** | **D Ord.** | **J/JJ** |
|  | | | |  |  |  |  |
| **Nr.** | **Name** | | **Vorname** | | **Jahrgang** | **Lizenz Nr.** | |
| 1 |  | |  | |  |  | |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Gruppenname:** | |  | | **Kat.:** | **A Sport** | **D Ord.** | **J/JJ** |
|  | | | |  |  |  |  |
| **Nr.** | **Name** | | **Vorname** | | **Jahrgang** | **Lizenz Nr.** | |
| 1 |  | |  | |  |  | |
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| 3 |  | |  | |  |  | |
| 4 |  | |  | |  |  | |
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Die angemeldeten Schützen sind Mitglieder unseres Vereins.

Ort und Datum: Stempel und Unterschrift