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| **FINAL ENTRY FORM** | **Rifle and Pistol – Individual** | **Please return by** | **11 MAR 2023** | **to ISSF Headquarters** |
| name of federation |  | nation code |  |  |
| contact person |  | phone number |  |
| e-mail address |  | fax number |  |
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|  |  |  |  | **Please fill „X“ for Quota/Regular and „M“ for MQS only, for team participation „T“ next to X or M** |
| **no** | **athletes** | **date of birth** | **men** | **women** |
| **family name** | **first name** | **ISSF ID number** | **DD** | **MM** | **YY** | **AR60** | **R3X20** | **AP60** | **RFP** |  |  | **AR60W** | **R3X20** | **AP60W** | **SP** |  |  |
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