*Annex1*

**PRELIMINARY/FINALENTRYFORM**

|  |  |
| --- | --- |
| **Country:**  **e-mail:**  **tel. and name of coach:** | **Total number of people** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***№*** | ***FULL Name as in the passport*** | ***Gender***  ***M/F*** | ***Date of birth*** | ***Weight category,***  ***sports /combat sambo*** |
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| 20 |  |  |  |  |

**Please return to:** [**k\_sobih@yahoo.com**](mailto:k_sobih@yahoo.com)**;confederationafricainedesambo@gmail.com**

**President**

**Stamp and signature**