

PLANILLA DE INSCRIPCIÓN

**CAMPEONATO INTERCARRERAS VOLEIBOL MIXTO**

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| NOMBRE EQUIPO: | CARRERA: |
| DELEGADO TITULAR: | TELEFONO CELULAR: |
| DELEGADO SUPLENTE: | TELEFONO CELULAR: |

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| **N°** | **NOMBRE** | **APELLIDOS** | **RUT** | **N° MATRÍCULA** | **CARRERA** | **E-MAIL** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
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| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |

FIRMA Y TIMBRE DIRECTOR DE CARRERA