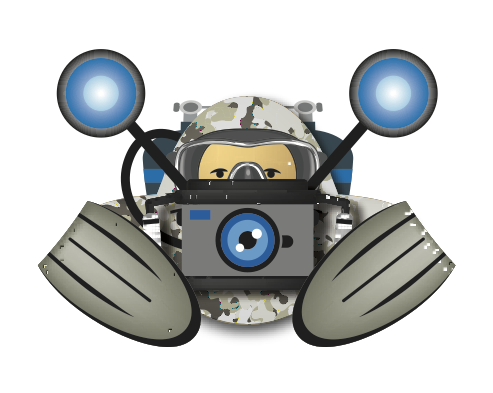
**14ème TROPHEE Olivier GRIMBERT FICHE D’INSCRIPTION **

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CLUB |  | | | | | | | | | | | | | | | | N° |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| EQUIPE |  | | Ordre de Passage | | | | |  | | ZONE | | | |  | |  | | | | | | |
| *ne rien écrire ci-dessus* | | | | | | | | | | | | | | | | | | | | | | |
| PHOTOGRAPHE | | | | | | |  | | | | | | | | | | Date de | | Niveau de | N°Licence 2019 | Date Certificat Médical | | |
| Nom | | | | | | | Prénom | | | | | | | | | | naissance | | plongée |  |  | | |
|  | | | | | | |  | | | | | | | | | |  | |  |  |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| MODELE | | | | | | |  | | | | | | | | | | Date de | | Niveau de | N°Licence 2019 | Date Certificat Médical | | |
| Nom | | | | | | | Prénom | | | | | | | | | | naissance | | plongée |  |  | | |
|  | | | | | | |  | | | | | | | | | |  | |  |  |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| ACCOMPAGNATEUR | | | | | | |  | | | | | | | | | | Date de | | Niveau de | N°Licence 2019 | Date Certificat Médical | | |
| Nom | | | | | | | Prénom | | | | | | | | | | naissance | | plongée |  |  | | |
|  | | | | | | |  | | | | | | | | | |  | |  |  |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| ADRESSE | | | | | | |  | | | | | Téléphone | | | | | | | **e-mail** |  |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **MATERIEL** | | **Photo** | | **Modèle** | Accomp |  | | | **Photo** | | **Modèle** | | Accomp | |  | | | | | | |
|
| **Blocs** | |  | |  |  | **Gilets** | | |  | |  | |  | |
|
|  | **Plombs** | | |  | |  | |  | |
| **Détendeurs** | |  | |  |
|
|

A retourner avant le 15 mars 2019 à **Yves KAPFER**

24 place des mimosas 69290 CRAPONNE, e-mail : *yves.kapfer@gmail.com,* tel : *06 87 29 97 69*