Verein

Kontaktperson       Kontakt E-Mail Adresse

Kontaktadresse       Telefonnummer

Beachten Sie beim Ausfüllen das dazugehörige Schreiben vom 13. September 2019.

***Beispiel:***

|  |  |  |  |  |  |
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| **Raumanzahl** | **Dauer** | **Wochentag** | **Zeit (zwischen)** | **Raum** | **Bemerkung** |
| 2 Turnhallen | 120 Min. | Mo oder Di | 17.00 bis 20.00 Uhr | TW | wird mit Harz gespielt daher TW |

***„MUSS“ Reservationswünsche:***

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| **Raumanzahl** | **Dauer** | **Wochentag** | **Zeit (zwischen)** | **Raum** | **Bemerkung** |
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***Wenn möglich zusätzlich gerne:***

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| **Raumanzahl** | **Dauer** | **Wochentag** | **Zeit (zwischen)** | **Raum** | **Bemerkung** |
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