

**SPORTSKA ZAJEDNICA GRADA DARUVARA**

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IBAN:HR3423400091100186518

**OIB 94129038902**

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 (naziv škole-vrtića)

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 (mjesto – adresa)

**PRIJAVNI LIST UČESNIKA KOJI ĆE TRČATI NA**

**„34. KROSU GRADA DARUVARA“**

**16. listopada 2015. godine**

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| **R.broj** |  **IME I PREZIME** |  **RAZRED** |
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Molimo Vas da popunjeni obrazac vratite na e-mail adresu Sportske zajednice **sportska.zajednica.grada.daruvara@bj.t-com.hr** najkasnije, do **14. 10. 2015.** Dostavite nam i podatke o sportskim uspjesima učesnika krosa.

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(VODITELJ-ime i prezime, mobitel) MP (RAVNATELJ)