1. MHC 2025

24.05.2025

Registration

Schule/school _____

Meister,Trainer/ Shi Fu, coach _____

Stil/style _____

	Name	***Vorname***	***Alter***	***Kung Fu Erfahrung***	***Gewicht***	***Handform***	***Waffenform***	***Partnerform***	***Partner Nr.***	***Vollkontakt***
	Surname	***First Name***	***Age***	***Kung Fu Experience***	***Weight***	***Barehand***	***Weapon***	***2 men set***	***partner nr.***	***Full Contact***
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