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| Data da solicitação da Inscrição: | | | | | |  | | | Assinatura do Atleta: | | | |  | | | | | | | | |
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| ***ANO*** | ***DATA*** | ***CLUBE*** | ***FEDERAÇÃO*** | ***Cart. Nº*** | ***Condições*** |
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**O atleta signatário declara, sob as penas da lei, que todas as informações e dados aqui consignados expressam a verdade.**