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|  |  | Директору ФГБУ ПОО «ГУОР по хоккею» | | |
|  |  | Крошевой Е.А. | | |
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|  |  | *фамилия, имя, отчество заказчика* | |  |
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ЗАЯВЛЕНИЕ

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| Прошу зачислить моего р*ебенка* ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | | | | | | |
| *(указать ФИО ребенка)*  *на 2020 /2021 учебный год в секцию/ кружок \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | | | | |
| с « |  | » |  | 20 |  | года |  |

*(дата начала занятий)*

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*(дата) подпись ФИО*