**TAKIM BAŞVURU FORMU**

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| PLAJ VOLEYBOLU TURNUVASI   1. Herhangi bir yaralanma veya sakatlığa sebebiyet vermemek için sorumlu kişilerin talimatlarına uyacağımıza, 2. Etkinlik esnasında ve sonrasında yaşanacak herhangi bir sağlık sorunu ve sakatlık durumunda sorumluluğun tamamını üzerime alacağımıza 3. Müsabakaya katılım göstermediğimiz takdirde hükmen mağlup olacağımı/mızı kabul ettiğimizi 4. Maç esnasında alınacak olan video ve fotoğraf görsellerinin sosyal medya platformlarında ve ulusal görsel medyada yayınlanmasına rıza göstereceğimizi   **TAKIM & OYUNCU BİLGİLERİ**   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | |  | VOLEYBOL | | x |  | |  |  | | | | TAKIM ADI: | | | |  | | | | **S.NO** | **ADI SOYADI** | **T.C. KİMLİK NO** | | **İRT. TELEFONU** | **İMZA** | | **1** |  |  | |  |  | | **2** |  |  | |  |  | | **3** |  |  | |  |  | | **4** |  |  | |  |  | |  |  |  | |  |  | |  |  |  | |  |  | |  |  |  | |  |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | | **TAKIM SORUMLUSU** | | | | **Adı Soyadı** |  | | | **İrtibat Telefonu** |  | | | **İMZA:** | |  | |  |  |  |   **Beyan ve taahüt ederim …../…../2024** |