|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 注意：请将宏安全性设置为“中”，打开本文件时，选择“启用宏” |  |  |  |  |  |  |
| **单位（盖章）：** | 步骤： | 1、检查单位是否正确，输入领队、教练姓名,不用的栏请空着 |  |  |  |  |
|  |  |  |  |  | 2、输入运动员姓名，号码无需输入(若组委会要求输入，则输在姓名前面,如"0501张三") |  |
| 领队： |  | 3、双击点入运动员报名项目(个人项目+集体项目最多四项)，再双击则取掉勾。 | 或人工输入“√” |  |
| 教练： |  | 4、如果测验运动员，在测验列打勾。出生日期格式必须是yy.mm.dd(例1995.01.04) |  |  |
| **联系电话（必须填写）** | 5、绝对不要修改工作表名“运动报名表”,完成后将文件上报,复制到新表中排版后打出纸质表 |
| **学生组男子** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 序号 | 学号 | 姓名 | 100米 | 200米 | 400米 | 800米 | 1500米 | 110米栏 | 4×100米 | 4X400米 | 跳高 | 跳远 | 三级跳远 | 铅球 | 铁饼 | 标枪 | 备注 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **学生组女子** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 序号 | 学号 | 姓名 | 100米 | 200米 | 400米 | 800米 | 1500米 | 100米栏 | 4×100米 | 4X400米 | 跳高 | 跳远 | 三级跳远 | 铅球 | 铁饼 | 标枪 | 备注 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 19 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 20 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**附件2**

**嘉兴学院第二十届运动会长距离跑运动员体检表**

 **学院（盖章） 联系人： 联系人电话：**

**注：1500M以上项目运动员必须经过校医院体检合格方能参赛。**

**（体检时间：10月19日〜10月22日；每天8：00〜11：00，14：00〜16：30。）**

|  |  |  |  |
| --- | --- | --- | --- |
| **类别** | **项目** | **报名学生基本信息** | **校医院****体检结论** |
| **序号** | **班级** | **姓名** | **学号** |
| **男子** | **1500M** | 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| **女子** | **1500M** | 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

校医院盖章

年 月 日