中華民國壘球協會

2024社會甲級女子壘球聯賽保險資料表

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| 隊名 |  | | | | | | |
| 序號 | 被保險人姓名 | 被保險人  身分證字號 | 被保險人  生日(民國) | 未滿18歲法定代理人資料(父或母) | | | |
| 姓名 | 身分證字號 | 生日(民國) | 行動電話 |
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| 僅供本次賽事報名保險使用 |