



ÖSTM 2010 FITA Outdoor
21.-22. August 2010

Name: _____

| 1/8 Elimination | | | Scheibe: | | | | | | |
|-------------------|---|---|----------|---|---|---|-------|--------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | Summe | Punkte | Ges. |
| Satz 1 | | | | | | | | | |
| Satz 2 | | | | | | | | | |
| wenn erforderlich | | | | | | | | | |
| Satz 3 | | | | | | | | | |
| wenn erforderlich | | | | | | | | | |
| Stechen | | | | | | | | Erg. | |

Schütze: _____

Gegner: Name: _____

Unterschrift: _____

gewonnen

verloren

| 1/4 Finale | | | Scheibe: | | | |
|---------------------|---|---|----------|-------|----------|--------------------------|
| | 1 | 2 | 3 | Summe | Punkte | Ges. |
| Satz 1 | | | | | | |
| Satz 2 | | | | | | |
| Satz 3 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 4 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 5 | | | | | | |
| wenn erforderlich | | | | | | |
| Stechen | | | | | Erg. | |
| | | | | | gewonnen | <input type="checkbox"/> |
| | | | | | verloren | <input type="checkbox"/> |
| Schütze: _____ | | | | | | |
| Gegner: Name: _____ | | | | | | |
| Unterschrift: _____ | | | | | | |

| 1/2 Finale | | | Scheibe: | | | |
|---------------------|---|---|----------|-------|----------|--------------------------|
| | 1 | 2 | 3 | Summe | Punkte | Ges. |
| Satz 1 | | | | | | |
| Satz 2 | | | | | | |
| Satz 3 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 4 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 5 | | | | | | |
| wenn erforderlich | | | | | | |
| Stechen | | | | | Erg. | |
| | | | | | gewonnen | <input type="checkbox"/> |
| | | | | | verloren | <input type="checkbox"/> |
| Schütze: _____ | | | | | | |
| Gegner: Name: _____ | | | | | | |
| Unterschrift: _____ | | | | | | |

| 1./2. od. 3./4. Pl. | | | Scheibe: | | | |
|---------------------|---|---|----------|-------|----------|--------------------------|
| | 1 | 2 | 3 | Summe | Punkte | Ges. |
| Satz 1 | | | | | | |
| Satz 2 | | | | | | |
| Satz 3 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 4 | | | | | | |
| wenn erforderlich | | | | | | |
| Satz 5 | | | | | | |
| wenn erforderlich | | | | | | |
| Stechen | | | | | Erg. | |
| | | | | | gewonnen | <input type="checkbox"/> |
| | | | | | verloren | <input type="checkbox"/> |
| Schütze: _____ | | | | | | |
| Gegner: Name: _____ | | | | | | |
| Unterschrift: _____ | | | | | | |