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| **FECHA INSCRIPCIÓN** | **DOCUMENTO IDENTIDAD** | **NOMBRE Y APELLIDOS** | **CELULAR** | **CORREO ELECTRÓNICO** | | **ÁREA O**  **DEPENDENCIA** | **FIRMA** |
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| RESPONSABLE DE LA INSCRIPCIÓN: | | | | | EDIFICIO: | | |
| FECHA / HORA APERTURA |  | | FECHA / HORA  CIERRE |  | |  |  |