

Nome: _____ Idade: _____

Telefone: _____ Horário: _____ Instrutor: _____

Mês	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				

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BOLA	
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CADILAC	
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CHAIR	
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COLUMPIO	
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LIRA	
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REFORMER	
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