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| **#** | **Fecha** | **Hora** | **Nombres y Apellidos** | **Documento o**  **Código** | **Estamento: Estudiante, Docentes, Administrativo, Egresado, Jubilado y Afiliado Honorifico** | **Servicio** | | | **Rol** | | **# de personas** | | **Firma** |
| **P** | **H** | **E** | **A** | **B** | **A** | **N** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **SERVICIO:** P: Pasadía H: Hospedaje E: Evento **ROL:** A: Afiliado B: Beneficiario **# PÉRSONAS**: A: Adulto N: Niño o Niña | | | | | | | | | | | | | |