**参会回执表**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 单位信息 | | | | | | |
| 单位全称 | | （盖章） | | | | |
| 联系人 | |  | | | 邮编 |  |
| 电子邮箱 | |  | | | 电话 |  |
| 通讯地址 | |  | | | | |
| 参会人员情况 | | | | | | |
| 姓名 | 性别 | | 职务/职称 | 邮箱 | | 手机号码 |
| 1 |  | |  |  | |  |
| 2 |  | |  |  | |  |
| 3 |  | |  |  | |  |
| 4 |  | |  |  | |  |
| 5 |  | |  |  | |  |
| 6 |  | |  |  | |  |
| 参会方式 | | | | | | |
| 参会人员身份 | | | |  | | |
| 备注：本次活动不收取任何费用，食宿自理 | | | | | | |