附件：

参会回执表

（单位公章）

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **单位名称** |  | | | | |
| 地 址 |  | | | | |
| 联系人姓名 |  | 职 务 |  | 联系电话 |  |
| **参会人员信息** | | | | | |
| 参会人姓名 | 性 别 | 职 务 | 手 机 | 备 注 | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |