附件

**报名回执**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **单位名称** | **中文：** | | | | | | |
| **英文：** | | | | | | |
| **人员信息** |  | **姓名** | **性别** | | **职务** | | **证件号** |
| **1** |  |  | | | | |
| **2** |  |  | | | | |
| **联系人** |  | | | | | | |
| **电话** |  | | | **手机** | |  | |
| **传真** |  | | | **邮箱** | |  | |

请于8月31日前传回028-68909130。