附件

**参会回执**

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| --- | --- | --- | --- | --- | --- | --- |
| 姓名 | 性别 | 职务 | 职称 | 工作单位 | 手机 | 邮箱 |
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| 住宿 | 15日：是□否□ 16日：是□否□ 单间□ 标间□ | | | | | |