附件

参会人员回执

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **工作单位及职务** | **联系电话** |
|  |  |  |  |  |
|  |  |  |  |  |

**请按照要求，分别报送相应的邮箱。**