附件1

参会回执表

填报单位：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名 | 单位 | 职务/职称 | 联系电话 | 备注 |
|  |  |  |  |  |
|  |  |  |  |  |

注：回执传至1391797112@qq.com

附件2

