附件：参会回执

单位会员交流会参会回执

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| 单位名称 | |  | | | | | 参会人数： | | | | |
| 联 系 人 | | 姓名 |  | | | 邮箱 |  | | | | |
| 手机 |  | | | 电话 |  | | | | |
| 参会者姓名 | | 性别 | 民族 | | 职务/职称 | | 是否会员 | | 手机 | | 邮箱 |
|  | |  |  | |  | |  | |  | |  |
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| 发言申请 | | 是否申请发言 | | | 囗是 囗否 | | | | 发言人 | |  | |
| 发言内容概要： | | | | | | | | | | |

5月15日截止报名，邮箱：[xhmsc123@126.com](mailto:xhmsc123@126.com)