附件一：

**报名回执表**

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| 单位名称 |  | | | | | | | | | |
| 通信地址 |  | | | | | 联系人 |  | | 电话 |  |
| 姓 名 | 性 别 | 职称 /职务 | 专业/科室 | 手 机 | 电子邮箱 | | | | | 身份证号码 |
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| 住宿预订 | 是 否 | | | | | | | | | |
| 房型选择 | □标准单人间 | | 标准双人间 | | 是否合住 | | | 是 | | □否 |
| 入住时间： | | | | | 退房时间： | | | | | |