附件：

**继续教育研修班报名回执**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** |  | | | **性别** |  | | **职务/职称** |  | |
| **单位及**  **通讯地址** |  | | | | | | | **邮编** |  |
| **邮 箱** |  | | **手机** | | |  | | | |
| **住宿** | **单住□** | **合住□** |  | | | | | | |

请务必于8月10日前返回(邮件、短信、微信均可)。