附件：

**培训班回执表**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓名 | 工作单位 | 联系方式 | 参会时间 | | |
| 10月中旬 | 10月下旬 | 11月上旬 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| 备注：请在参会意向中选择打“√”，准确填写手机联系方式，发短信通知 | | | | | |

回执邮箱：**[936659072@qq.com](mailto:hnsjzyxh@126.com)**