附件：

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **参会回执** | | | | | | |
| **单位** | **姓名** | **性别** | **部门** | **联系电话** | **邮箱** | **是否住宿** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**注：住宿人员请注明住宿时间和房间类型（单人间、双人间），住宿费用自理。**