附件2：

会议回执

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | | | 邮 编 | |  |
| 开具发票抬头 |  | | | | | | 传 真 | |  |
| 纳税人识别号 |  | | | | | | | | |
| 通讯地址 |  | | | | | | | | |
| 联系人 |  | | 部 门 | |  | | 职务/职称 | |  |
| 电 话 |  | | 手 机 | |  | | Email | |  |
| **参会人员信息** | | | | | | | | | |
| 姓 名 | 性 别 | 部 门 | | 职务/职称 | | 手 机 | | Email | |
|  |  |  | |  | |  | |  | |
|  |  |  | |  | |  | |  | |
| 住 宿 | 单人间（ ）间 标准间（ ）间 | | | | | | | | |
| 备 注： | | | | | | | | | |

注：1.如有其它特殊要求请在备注中说明;

2.电子版会议回执填写后请发至邮箱：emcchy2014@163.com。

