**参会回执**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | 性别 |  | 职称 | |  | | | 职务 | |  |
| 工作单位 |  | | | | | | | | | | |
| 通讯地址 |  | | | | | | | 邮编 | |  | |
| 联系方式 | 办公电话 | | 手机 | | | | E-mail | | | | |
|  | |  | | | |  | | | | |
| 住宿要求 | □单住  □合住 | 饮食方面特殊要求 | | |  | | | | | | |
| 来程到达时间，航班/车次 | |  | | | | | | | | | |
| 返程时间，航班/车次 | |  | | | | | | | | | |

**为便于会议安排，请您务必于2018年4月30日前将参会回执表通过电子邮件或传真发送至承办单位，联系方式参见正文第六点。**