附件：

**报名回执表**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | **1.报名信息** | | |
|  |  |  |  |  |  |  |
| **单位名称** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **通信地址** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **姓名** |  |  |  |  | **性别** |  |
|  |  |  |  |  |  |  |
| **学历** |  |  |  |  | **手机** |  |
|  |  |  |  |  |  |  |
| **职称** |  |  |  |  | **职位** |  |
|  |  |  |  |  |  |  |
| **住宿** |  | **□单间** | |  | **学分证** | **□要** |
|  |  | **□拼房** | |  |  | **□不要** |
|  |  |  |  |  |  |  |
| **入住日期** |  |  |  |  | **离开日期** |  |
|  |  |  |  |  |  |  |
|  |  |  |  | **2.发票信息** | | |
|  | |  |  |  |  |  |
| **发 票 抬 头** | |  |  |  |  |  |
|  | |  |  |  |  |  |
| **纳税人识别号** | |  |  |  |  |  |
|  |  |  |  |  |  |  |

注：1.请于 11 月 10 日前将本表发至：weishihengda@163.com，邮件名为“介入会注册”；

2.会议注册费发票将由承办单位“北京维视恒达科技服务有限责任公司”开具；

3.学习班将于 2019 年 11 月 22-24 日在北京举办（11 月 22 日全体报到）。