**报名回执**

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| --- | --- | --- | --- |
| 单位名称 |  | | |
| 参会人姓名 |  | | |
| 职务 |  | | |
| 电话 |  | 邮箱 |  |

报名邮箱地址：[fljiangqiao@ccpit.org](mailto:fljiangqiao@ccpit.org)