附件：

参会回执

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| --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | 联系人 |  |
| 联系方式 |  | | 职务 | | |  |
| 参会人员 | 职务 | 联系方式（手机号） | | 身份证号（用于入场登记） | | |
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参会报名表请发至：ccas\_hotpot@163.com