附件

水利工程有害生物宗合防治培训班

预报名回执

填报时间：2019年 月 日

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **单位全称** | | |  | | | | |
| **统一信用代码或纳税人识别号** | | | | |  | | |
| **联系人** | | |  | | **联系电话** |  | |
| **报名信息** | | | | | | | |
| **序号** | **姓名** | **性别** | | **身份证号** | | | **手机号码** | |
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| 9 |  |  | |  | | |  | |

提示：请于3月31日前，将填写好的回执发至水利学会邮

箱（gdsslxh@yeah.net）