**参加培训人员报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | 企业注册地 | | |  |
| 税号 |  | | | | | | |
| 联系人 |  | 联系人电话 | | |  | | |
| 是否  开专票 |  | 接收发票人  手机号码 | | |  | | |
| 单位地址 |  | | | | | | |
| 参加培训人员信息 | | | | | | | |
| 姓名 | 身份证号 | | 职务 | | | 手机号码 | |
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| 开票信息（专票的请详细填写） |  | | | | | | |

注：此表可复印报名表电子版发至：463399896@qq.com