附件1

**培训班报名回执**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **单位名称** |  | | | | |
| **姓 名** | **性别** | **职务/职称** | **手机** | **E-mail** | **缴费方式**  **（汇款/现场）** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **培训费付款单位全称（即：发票抬头）：**  **纳税人识别号：** | | | | | |
| **发票邮寄地址：** | | | | | |

注：汇款较晚或现场缴费的学员请留下发票邮寄地址。