参会回执

报送单位（盖章）：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名 | 职务 | 联系电话 | 参会情况（参会、请假） | 备注 |
|  |  |  |  |  |
|  |  |  |  |  |